

| Applicant: Property  |                          | Owner:  |                                      | Contractor:                                     | Contractor:         |  |
|--|--------------------------|---|--------------------------------------|---|---------------------|--|
| Mailing Address: Mailing Ad                                |                          | .ddress:  |                                      | Mailing Address:                                | Mailing Address:    |  |
| Phone: Phone:  |                          |   |                                      | Phone:  | Phone:              |  |
| Email: Email:  |                          |   |                                      | Email:  | Email:              |  |
| Architect/Engineer/Designer:                               |                          | Description of \  | Vork:                                |   |                     |  |
| Firm: (if any)   |                          |   |                                      |   |                     |  |
| Mailing Address:   |                          |   |                                      |   |                     |  |
| Phone:   |                          |   |                                      |   |                     |  |
| Email:   |                          | Municipal Authorization   |                                      |   |                     |  |
| Location   |                          | ┥.  | (For Appli                           | cations Outside the RM of F                     |                     |  |
| Location:  Civic Address (road number and street name):    |                          | I   | (                                    | Print Name)                                     | on behalf of the    |  |
|  |                          |   |                                      |   | confirm that        |  |
| Legal Description:   |                          | (Municipality)  the applicants have met, or agreed to meet, all requirements of our |                                      |   |                     |  |
|  |                          | пе арр  |                                      | on pertaining to this p                         |                     |  |
| Jurisdiction (Municipality where this project is located): |                          |   |                                      |   |                     |  |
| (Municipality)   |                          |   | (Title)                              |   | (Signature)         |  |
| Construction Value:<br>\$                                  | Building                 | g Size:   | ft Depth:                            | ft Tot  | tal Area:ft²        |  |
| Class of Work:   |                          |   |                                      |   |                     |  |
| New Construction Alteration                                |                          |   | Addition                             |   | Demolition          |  |
| Relocation T   | emporary                 |   | Change in Occupan                    | cy Other:                                       |                     |  |
| Documents Required/Provided:                               |                          |   |                                      |   |                     |  |
| Structural Drawings  | Structural Drawings Arch |   | 5                                    | Staking Certificate/BLC/<br>Construction Layout | Fire<br>Suppression |  |
| Mechanical/Plumbing Lette Drawings                         |                          | ers of Assurance  | of Assurance Letter of Authorization |   |                     |  |
| Electrical Drawings Site P                                 |                          | Plan  | Development Permit                   |   |                     |  |
|  |                          | FOR OFFICE  | USE ONLY                             |   |                     |  |
| Occupancy Classification:                                  |                          | Date Received:  |                                      |   |                     |  |
| Notes:   |                          |   |                                      |   |                     |  |
|  |                          |   |                                      |   |                     |  |
|  |                          |   |                                      |   |                     |  |
|  |                          |   |                                      |   |                     |  |
|  |                          |   |                                      |   |                     |  |
|  |                          |   |                                      |   |                     |  |
|  |                          |   |                                      |   |                     |  |
|  |                          |   |                                      |   |                     |  |
|  |                          |   |                                      |   |                     |  |
|  |                          |   |                                      |   |                     |  |
|  |                          |   |                                      |   |                     |  |