

COMMERCIAL

 RESIDENTIAL
CONTACT INFORMATION

OWNER: _____	APPLICANT: _____
MAILING ADDRESS: _____	MAILING ADDRESS: _____
CITY / PROVINCE: _____	CITY / PROVINCE: _____
POSTAL CODE: _____	POSTAL CODE: _____
PHONE NO.: _____	PHONE NO.: _____
EMAIL: _____	EMAIL: _____

PROPERTY INFORMATION

MUNICIPALITY: _____

LEGAL DESCRIPTION: _____

CIVIC ADDRESS: _____

DESCRIPTION OF WORK(S): _____

PROPOSED BUILDING INFORMATION

Number of Plumbing Fixtures: _____ Estimated Value: \$ _____

Includes all floor drains and interceptors

REQUIRED INFORMATION
COMMERCIAL
RESIDENTIAL

Layout Plan of Proposed Work to be completed <input type="checkbox"/>	Layout Plan of Proposed Work to be completed <input type="checkbox"/>
Licensed Plumber to provide a Copy of Certification / Red Seal <input type="checkbox"/>	Letter of Authorization (<i>may be required</i>) <input type="checkbox"/>
Letter of Authorization <input type="checkbox"/>	Residential Plan Review Fee payable by debit, cheque or cash (<i>Please refer to fee schedule</i>) <input type="checkbox"/>
Commercial Plan Review Fee payable by debit, cheque or cash (<i>Please refer to fee schedule</i>) <input type="checkbox"/>	

DECLARATION

The undersigned hereby applies for a permit in accordance with this application, all municipal by-laws and provincial regulations applicable thereto.

Applicant Name: _____

Applicant Signature: _____ Date: _____

OFFICE USE ONLY:

PLAN REVIEW RECEIPT NO.: _____	ROLL NO.: _____
DATE OF SUBMISSION: _____	ZONE: _____
RECEIVED BY: _____	

