

Development Permit Application Form

Permit Number: _____

PLEASE PRINT

Applicant Section:

*Applicant Name: _____

Mailing Address: _____

City: _____ Prov.: _____ Postal Code: _____

Phone: _____ Fax: _____ Work: _____ Work Fax: _____

*Owner Name: _____

Mailing Address: _____

City: _____ Prov.: _____ Postal Code: _____

Phone: _____ Fax: _____ Work: _____ Work Fax: _____

*Contractor Name: _____

Mailing Address: _____

City: _____ Prov.: _____ Postal Code: _____

Phone: _____ Fax: _____ Work: _____ Work Fax: _____

Project Location:

Municipal (Street) Address: _____

Tax Roll #: _____

Lot: _____ Block: _____ Plan: _____ Zoning: _____

**** For Office Use Only ****

Advertising Required: Yes No

Dates Advertised: _____ & _____

Permit Issue Date: _____

Conditions of Approval:

Development Officer: _____