



## Permit Application

Request started on: _____	Request Completed on: _____	Req. No	<input type="text"/>
Entered by: _____			
Permit Type: <b>Construction</b>			
Type of work: _____			

### Identification

Owner	Applicant
Name: _____	Name: _____
Address: _____	Address: _____
City: _____	City: _____
Postal Code: _____	Postal Code: _____
Phone: _____	Phone: _____

### Location

Address: _____
Lot No.: _____
Zone(s): _____
Frontage: _____
Depth: _____
Area: _____
Service: _____

### Work

Contractor	Responsible Person
Name: _____	Name: _____
Address: _____	Phone: _____
City: _____	Work starting date: _____
Postal code: _____	Work completion target date: _____
Phone: _____	Completion date: _____
Fax: _____	Work value: _____
RBQ No.: _____	

**New residential construction**

**Project**  
 Construction  Addition

**Dwelling Units**  
Dwelling Units Created: \_\_\_\_\_ Dwelling Units Removed: \_\_\_\_\_

<b>Building Area</b>	<b>Existing</b>	<b>Projected</b>	<b>Number of bedrooms</b>
Ground area:	_____	_____	Existing: _____
Area of floors:	_____	_____	Future: _____
Total Area:	_____	_____	

**Building dimensions**  
Façade: \_\_\_\_\_ Back: \_\_\_\_\_  
Left side: \_\_\_\_\_ Right side: \_\_\_\_\_

**Height**  
Building: \_\_\_\_\_ Basement: \_\_\_\_\_  
First floor: \_\_\_\_\_ Basement above ground level: \_\_\_\_\_  
Storeys: \_\_\_\_\_ Number of storeys: \_\_\_\_\_

**Materials used**  
Foundation: \_\_\_\_\_ Chimney: \_\_\_\_\_  
Exterior finish: \_\_\_\_\_ Roof: \_\_\_\_\_

**Reference**

	<b>Prepared by</b>	<b>Blueprint No.</b>	<b>Date</b>
Architect:	_____	_____	_____
Land surveyor:	_____	_____	_____
Engineer:	_____	_____	_____

**Establishment (distance from lines)**

Front: \_\_\_\_\_

Back: \_\_\_\_\_

Right side: \_\_\_\_\_

Left side: \_\_\_\_\_

Weeping field: \_\_\_\_\_

Septic tank: \_\_\_\_\_

Land coverage ratio % (Ground area / Land area): \_\_\_\_\_

Required Documents	Receipt	Receipt Date
2 sets of building plans	<input type="checkbox"/>	
Form duly filled in	<input type="checkbox"/>	
Plot plan	<input type="checkbox"/>	

**Work Description**

**Applicant's Signature**

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

