

Demolition Permit Sign Permit Residential Non Residential	Building Permit Infill	New Development	
Address of Work:			
Description of Work:			
Dimensions (if applicable):	Square I	Footage (if applicable):	
Value of Construction:			
Documents Required: Site Plan Proper Elevations/Cross Sections Heating & V Engineered Stamped Drawings for Roof and	entilation Eng		ry) Building Plans
Applicant Information:			
Contact Name:	Co	ompany:	
Address:			
City :	Province:	Posta	ll Code:
Phone No.: (Primary)	(S	Secondary):	
Email Address:		Property Owner	Contractor
Owner Information (if different than above):			
Contact Name:	Co	ompany:	
Address:			
City :	Province:	Posta	l Code:
Phone No.: (Primary)	(S	Secondary):	
Email Address:			
Contractor Information (if different than above):			
Contact Name:	Co	ompany:	
Address:			
City :		Posta	l Code:
Phone No.: (Primary)	(S	Secondary):	
Email Address:			

The undersigned, being the applicant or authorized agent, hereby agrees to comply with all conditions and regulations set out herein, submits the required fees and deposits, and requests issuance of a permit, as indicated above. The signature presented shall certify that, to the best knowledge and beliefs of the applicant, or duly authorized agent, the information furnished in the application is true, complete and accurate. The applicant hereby agrees to be bound by applicable Municipal By-laws, other regulations of the Municipalities and, in the case of the City of Brandon, Standard Construction Specifications, and to such conditions, restrictions, and regulations as may be imposed by a representative of the Municipality.

Signature of Applicant: