



Development Services
638 Princess Ave Brandon MB R7A0P3
T: 204-729-2110 F: 204-728-2406
www.brandon.ca

Demolition Permit
Residential

Sign Permit
Non-Residential

Building Permit
Infill New Development

Address of Work: _____

Description of Work: _____

Dimensions (if applicable): _____ Square Footage (if applicable): _____

Value of Construction: _____

Documents Required: Site Plan Property Owner Authorization (if not your property) Building Plans
Elevations/Cross Sections Heating & Ventilation Engineered Plans
Engineered Stamped Drawings for Roof and Floor System (complete with shop drawings)

APPLICANT INFORMATION:

Contact Name: _____ Company: _____
Address: _____ City: _____ Province: _____
Postal Code: _____ Phone: _____ Property Owner
Email Address: _____ Contractor

OWNER INFORMATION (if different than above):

Contact Name: _____ Company: _____
Address: _____ City: _____ Province: _____
Postal Code: _____ Phone: _____
Email Address: _____

CONTRACTOR INFORMATION (if different than above):

Contact Name: _____ Company: _____
Address: _____ City: _____ Province: _____
Postal Code: _____ Phone: _____
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: _____ Date: _____