

OCCUPANCY PERMIT REQUIRED:

REFERRED TO COMMITTEE:

TOTAL PAID:

YES

YES

NO

NO

APPROVED:

TOWN OF PLACENTIA
21 PATTERSON DRIVE
PLACENTIA, NL
A0B 2Y0

PHONE: 709-227-2151

FAX: 709-227-2323

EMAIL: PUBLICWORKS@PLACENTIA.CA

WEBSITE: WWW.PLACENTIA.CA

	AUD 210			WEDSITE: WWW.FLACENTIA.CA	
	DEVELOP	MENT PER	RMIT APPLICATI	ON	
CONTACT INFORMA	ATION (PLEASE PRINT - TO	BE COMPLETE	D BY APPLICANT):		
APPLICANT NAME:			PROPERTY OWNER:		
CONTACT PERSON:			CONTACT PERSON:		
MAILING ADDRESS:			MAILING ADDRESS:		
POSTAL CODE:			POSTAL CODE:		
PHONE:]	PHONE:		
CELL:			CELL:		
EMAIL:			EMAIL:		
PROJECT DETAILS:					
CIVIC ADDRESS:					
TYPE OF PROJECT:	COMMERCIAL:		RESIDENTIAL:	OTHER:	
CONSTRUCTION:	EXTENSION:		DEMOLITION:	RENOVATION:	
WIDTH:	LENGTH:	HEIGHT:	FLOOR AREA ((FINISHED):	
COMMENCE DATE:		CO	MPLETION DATE:		
PLEASE NOTE:					
	NOT A PERMIT TO OCCUPY. IF	OCCUPANCY IS R	EQUIRED PLEASE FILL OUT	AN OCCUPANCY PERMIT APPLICATION.	
	OT BE PROCESSED UNTIL ALL F				
ENSURE ALL REQUIRI * WHERE THE APPLICAT REQUIRED BEFORE TI	ED INFORMATION HAS BEEN RE NT AND THE PROPERTY OWNER HE APPLICATION CAN BE ACCE	ECEIVED TO EXPE R ARE NOT THE SA PTED.	DITE THE APPLICATION PRO		
	NCLUDE DISTANCE FROM BOUN				
* BUSINESS OWNERS M	IUST SUBMIT WRITTEN NOTIFIC	CATION TO THE TO	WN OF PLACENTIA IMMEDI	IATELY UPON BUSINESS CLOSURE.	
DECLARATION:					
OF MY KNOWLEDGE. I	AGREE TO COMPLY WITH ALI	L MUNICIPAL REC E PLANS APPROV	GULATIONS, NATIONAL BU ED BY THE TOWN OF PLAC	RECT AND COMPLETED TO THE BEST UILDING CODE 2015, ANCILLARY CENTIA AND NOT TO COMMENCE CENTIA.	
APPLICANT SIGNATU	JRE:			***STAFF USE ONLY***	
DATE:	-		DATE RECEIV	ED:	
OWNER SIGNATURE:			RECEIVED BY	RECEIVED BY:	
- Date:			RECEIPT#		

FOR APPROVAL (OFFICE USE ONLY)

DRAWINGS SUPPLIED: YES

DATE:

NO