



## APPLICATION FOR A PERMIT TO DEMOLISH OR RELOCATE A BUILDING

F	Applica	nt Name:								
N	Mailing	Address			Town/Ci	ty	Pro	ovince	Postal Co	ode
F	Phone Number(s)				Email Address					
 EMOLIT	ΓΙΟΝ:	I hereby	/ make ar	oplication	for a pe	mit to	demolish	n a buildin	g now situa	ated on:
				- <u> </u>	Legal Lan				<u> </u>	
L	Lot		Blo	Block			Plan			
-	OR -	OR - All/Part of the			_ ¼, Section		Γownship <sub>.</sub>	, Range		W2
C	Civic Address (if applicable):  Work Description  Demolition Start Date  Demolition Completion Date									
_										
	Demolition Start Date				Demontion Completion				.e	
	The site	•	ing, final gr	ading, land	Iscaping, et	c.) which	will be do	one after rer	moval of the	building
			<b>DING:</b> I ha	•	ke applic	ation fo	r a perm	nit to mov	e a building	g within t
L	Lot			Blo	Block			Plan		
-	OR - All/Part of the		¼, S	_ ¼, Section		Γownship <sub>.</sub>		, Range		
C	Civic Address (if applicable):									
~	* to ~									
L	ot			Blo	Block			Plan		
-	OR -	OR - All/Part of the					, Township		, Range	
C	Civic Address (if applicable):  Name of Municipality:  Building									
ľ										
-	Size of Building Length Width				Height		Structure Area (area of largest story)			
	-engtn	wium		нец	Height		square metres/feet			
N	Name of Building Mover (if different than Applicant):  Start Date:  The building will be moved over the following route:									
S										
Т										
									responsible	
su re:	ich sun sponsil	n as may pility to er	be requirnsure comp	red by Sec	tion 6(1)(b n any other	o) of the applicab	Building le bylaws,	Bylaw. I a , acts and re	d building, an acknowledge egulations, ar	that it m
 D:	ate					Signati	re of App	licant		