

Application for a Demolition/Move Permit

A. Project information			
Building Address			
Type of Building to be Demolished/Moved			
Construction value est. \$			
B. Applicant Applicant is: <input type="checkbox"/> Owner or <input type="checkbox"/> Authorized agent of owner			
Last name		First name	Corporation or partnership
Mailing Address			Unit number
Town		Postal code	Province
Telephone number ()		Fax ()	Cell number ()
C. Owner (if different from applicant)			
Last name		First name	Corporation or partnership
Street address			Unit number
Town		Postal code	Province
Telephone number ()		Fax ()	Cell number ()
D. Contractor			
Last name		First name	Corporation or partnership (if applicable)
Street address			Unit number
Town		Postal code	Province
Telephone number ()		Fax ()	Cell number ()
E. Security Deposit			
<p>A security deposit of \$1,000.00 for each residential, commercial, industrial or institutional service connection shall be collected with each demolition or move permit.</p> <p>The security deposit will be retained by the Town Office and will be refunded to the applicant following an inspection by the Town of Outlook Superintendent. Deposits will only be returned providing all water and sewer disconnection have taken place and there are no damages to Town of Outlook property.</p>			
F. Signature			
<p>I have completed and understand the preceding information and the requirement to disconnect the Water and Sewer services to the above property and herewith agree to comply with such disconnection requirements. I understand that if I do not disconnect the services, that the Town will disconnect such service(s) and apply the security deposit to such work.</p> <hr style="width: 30%; margin-left: 0;"/>			
Owner Name (Please print)			
Signature of Owner		Date	