Application for a Building Permit

TOWN OF Outlook

IRRIGATION CAPITAL OF SASKATCHEWAN

For use by Principal Authority						
Application number:		Permit number (if different):				
Date received:		Roll number:				
Application submitted to Town of Outlook Box 518 Outlook, Saskatchewan S0L 2N0 ph. (306) 867-8663						
A. Project information				1 -	1	
Civic Address				Town	Lot.	
Block Postal code Plan number			Plan number			
Project value est. \$ Area of work (m²)						
B. Applicant Applicant is: Owner or Authorized agent						
Last name First name Corporal			Corporation or partners	orporation or partnership		
Mailing Address			1.	Unit number		
Town	Postal code		Province	E-mail		
Telephone number	Fax ()			Cell number ()		
C. Owner (if different from applicant)						
Last name First name Corporation or partr				ship		
Street address				Unit number		
Town	Postal code		Province	E-mail		
Telephone number	Fax ()			Cell number		
D. Builder						
Last name First name Corporation or partnership (if applicable)						
Street address				Unit number		
Town	Postal code		Province	E-mail		
Telephone number	Fax			Cell number		
E. Purpose of application						
□ New construction □ Addition to an □ Alteration/repair □ Demolition □ Other existing building						
		ent use of building				
Description of proposed work						
F. Attachments						
i. Attach a detailed Site Plan						
ii. Attach Foundation Plans/Floor Plans/Structural Plan/Elevations/Cross Sections or;						
iii. Attach Professional Design (sealed drawings)						
G. Declaration of applicant						
Icertify that:						
(print name)						
 The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge. I agree to comply with the Town of Outlook Building Bylaw and acknowledge that it is my responsibility to ensure compliance with the Building Bylaw and with any other applicable bylaws, acts, and regulations regardless of any plan review or inspections that may or may not be carried out by the town or its authorized representative. 						
Date	Date Signature of applicant					