

Pool Enclosure Permit Application

A. Project Information			
Building number, street name		Unit Number	Lot/con.
Municipality	Postal Code	Plan Number	
Project value est. \$		Area of Work (m ²)	
B. Purpose of Application		C. Description of Proposed Work	
Above-Ground Pool In-Ground Pool Hot Tub			
D. Applicant Information			
Last Name	First Name	Corporation or Partne	ership
Street Address	Province	Postal Code	
Municipality	Phone	Email	
E. Owner (if different from Applican	t)		
Last Name	First Name	Corporation or Partnership	
Street Address	Province	Postal Code	
Municipality	Phone	Email	
F. Declaration of Applicant			
١			declare that:
	(Print name)		
1. The information contained in	n this application, attached schedules, att	ached plans and spec	ifications, and other
	rue to the best of my knowledge.		
2. If the owner is a corporation	or partnership, I have the authority to bi	nd the corporation or	partnership.
Date:	e: Signature: Signature:		

PLOT PLAN

Please include the following information on your plan:

- 1. Please indicate a north arrow, street or road name.
- 2. The distance of proposed building to all 4 Property Lines (all 4 sides).
- 3. The distance of proposed building within 500 metres of each of the following:

Existing Buildings:	Septic Systems:
Creeks, Stream & Rivers:	Hydro Lines:
Kennels:	Livestock Operations:
Manure Storage Systems:	Pit & Quarry:

THIS SHEET MUST BE FILLED OUT

Signature: