Residential Building/Repair/Demolition Permit Application

Development Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Application No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Type: Build \_\_\_\_\_\_\_\_\_\_\_. Repair: \_\_\_\_\_\_\_\_\_\_ Demolition: \_\_\_\_\_\_\_\_\_\_\_\_

***Note: Demolition applications for dwellings constructed before 1985 require certificate of asbestos not present or removed****.*

Building Type: Single Family Dwelling: \_\_\_\_. Single Family Dwelling with Apartment: \_\_\_\_

Subsidiary Apartment: \_\_\_\_ Semi-Detached: \_\_\_\_ Apartment Building/Condominium: \_\_\_\_

Row Dwelling: \_\_\_\_ Extension to Existing: \_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant: Owner \_\_\_\_\_\_\_. Contractor \_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Description of Work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Note: If the proposed work includes a discretionary use under the Municipal Plan, or if a variance is required, the applicant will be required to pay additional fees for advertising.***

***Note: If the applicant is not the registered property owner, the application will not be accepted without written consent of the owner*.**

Proposed Means of Access: Existing Access \_\_\_\_\_ New Access & Culvert \_\_\_\_\_\_

 *(Permit from Transportation Required and Attached)*

Description of Land to be developed: Frontage \_\_\_\_\_\_\_\_ x Depth \_\_\_\_\_\_\_\_ = Area \_\_\_\_\_\_\_\_\_\_

 *(Attached Survey Required)*

Estimated Value of Work: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Heat Source: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Building Dimensions: (L) \_\_\_\_\_\_\_\_\_\_\_m/ft (W) \_\_\_\_\_\_\_\_\_\_m/ft (H) \_\_\_\_\_\_\_\_\_\_\_\_\_m/ft

 *(Attach two Copies of building plans required)*

Water & Sewar: Dug Well \_\_\_\_\_\_\_\_\_\_ Artesian Well \_\_\_\_\_\_\_\_\_\_ On-site septic system \_\_\_\_\_

 *(attached Service NL certificate required)*

Is the building within 15m of water resource? Y\_\_\_\_N\_\_\_\_\_ (*attach water resources required if yes)*

I/We, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the applicant(s), do solemnly declare the statements are true and made with a full knowledge of the circumstances connected with the application, and the plan(s) submitted correctly sets out the location of the development described in the application. I/We make this solemn declaration, conscientiously believing it to be true and with the full knowledge of the property owner and knowing that it is of the same force and effect as if made under oath.

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Registered Owner \_\_\_\_\_\_\_\_\_\_\_\_ Contractor \_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I/We \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_am/are the registered owner(s) of the property

in this application, and hereby give my consent to application being made on my behalf.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Collection of personal information via this form is authorized under the *Access to Information and Protection of Privacy Act*, *2025* and is needed to process your application. Questions about the collection and use of the information may be directed to the town clerk at townclerk@townofmountcarmel.ca

Office Use:

Zoning \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Discretionary Use Required Y/N Variance Required Y/N

Permit Fee: $\_\_\_\_\_\_\_\_\_\_\_\_ Discretionary/Variance Fee: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Receipt No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_