THE CORPORATION OF THE TOWNSHIP OF BROCK

APPLICATION FOR DEMOLITION PERMIT

Building Department, 1 Cameron St. E., P.O. Box 10, Cannington, ON L0E 1E0 Phone 705-432-2355

LOT DESCRIPTION	PLAN OR CONCESSION NO.	HOUSE NO.

OWNER	**APPLICATION TO DEMOLISH**
Name:	
Address:	☐ **PART OF BUILDING** ☐ **ENTIRE BUILDING**
Phone No.	
APPLICANT	
Name:	**Building Type:**
Address:	
Phone No.	**Present Use:**
CONSTRUCTOR	
Name:	**Particulars:**
Address:	
Phone No.	

NOTICE OF DISCONNECTION OF SERVICES FOR DEMOLITION

	Name	Signature	Date
HYDRO ONE/ VERIDIAN	_____	_____	_____
ENBRIDGE GAS	_____	_____	_____
BELL CANADA	_____	_____	_____
CABLE T.V.	_____	_____	_____
REGION OF DURHAM SANITARY SEWER/WATER	_____	_____	_____

NOTE: 1. Sanitary and storm sewer connections to be secured as required by the Region.
2. The water service will be turned off at the curb stop and the water meter removed from the building.

TO THE CHIEF BUILDING OFFICIAL:

The undersigned hereby applies for a permit in accordance with the application, plans, specifications and data sheets herewith submitted, and acknowledges that the proposed work must comply with the provisions of THE BUILDING CODE ACT, the Ontario Building Code and any other statutes or regulations of the Province of Ontario, and all by-laws of The Corporation of the Township of Brock and the Regional Municipality of Durham, it being expressly understood that neither the issuance of a permit nor the carrying out of inspections by the Township shall relieve the applicant from full responsibility for compliance with all the said statutes, regulations and by-laws.

The undersigned certifies:

1. That he/she is the owner/authorized agent of the owner named in this application.
2. That all statements made and information supplied in connection with this application are true and factual.
3. That the above-noted engineer or architect has been retained by the owner to carry out the field review of construction or demolition or both, pursuant to the provisions of the Building Code.
4. That the owner will assume cost of any damage to the property on any side of the lot, by the owner or employee during construction of the project.

SIGNATURE OF OWNER _____

SPECIAL CONDITIONS (IF ANY)

_____

Cannington, ON. _____ _____

Date Owner / Authorized Agent

TOTAL VALUE		**PERMIT FEE**	
FUTURE PROPOSAL		**ADDRESS**	
APPLICATION TAKEN BY DATE:	PERMIT ISSUED BY: DATE:	CONTRACTOR	**PERMIT NO.**

PERMIT NOT VALID UNTIL CHEQUE IS CLEARED BY BANK.