



**THE CORPORATION OF  
THE TOWN OF TECUMSEH**  
Tel: (519) 735-2184 Fax: (519) 735-6712

**Building Services Department  
917 Lesperance Road  
Tecumseh, Ontario N8N**

PERMIT NO.
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**QUICK PERMIT APPLICATION**

To the Chief Building Official, the undersigned hereby make application for a permit according to the plans and documentation herewith submitted and applicable zoning regulations to erect:

**FENCE**       **POOL**       **LOT GRADING**       **OTHER**

**LOCATION OF PROPERTY** \_\_\_\_\_  
(Municipal Number)

**DESCRIPTION OF WORK:** \_\_\_\_\_

Lot No.	Plan No.	Zone	Cost of Work \$
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PROPERTY OWNER'S INFORMATION		AGENT/BUILDER'S INFORMATION	
NAME:		NAME:	
ADDRESS:		ADDRESS:	
CITY:	POSTAL CODE:	CITY:	POSTAL CODE:
PHONE:	FAX:	PHONE:	FAX:

**THE FOLLOWING MUST BE SUBMITTED WITH THIS APPLICATION:**

- Two (2) Site Plans, complete with all measurements, applicable setbacks and lot coverage and/or layout drawings and specifications.
- Copies of any approvals or permits from municipal and provincial authorities or agents, committee of adjustment decisions, easements and right of ways.

I understand that the Chief Building Official may refuse to issue a permit if the proposed work will not comply with the Building Code Act, the Building Code or will contravene any other applicable law. I will supply upon request any other drawings, representations and/or documentation required to enable the Chief Building Official to determine compliance. I agree that the Chief Building Official shall determine the required fees calculated in accordance with the Municipality's by-law and shall pay such fees in full.

<b>DECLARATION</b>	
I, _____ am <input type="checkbox"/> The Owner <input type="checkbox"/> The Authorized agent of the owner named and (Name of Applicant)	
hereby certify that I have full knowledge of all the particulars contained in this application and solemnly declare that they are in every respect fully and truly stated to the best of my knowledge and belief.	
_____	_____
(Signature of Applicant)	(Date)

**FOR OFFICE USE ONLY**

Paid by:	Date Paid:	Roll #
Value: \$	Bldg. Code:	Work Code:
Permit Fee: \$	Acct. No. 11426005210	Assmt.: 11210003040
	Indemnity Fee: \$	Bldg. Area: \$
		TOTAL COST: \$

**APPROVAL**

This application is hereby approved as submitted. All work is to be done in accordance with the Building Code Act, the Building Code and any other applicable law. You must notify the Tecumseh Building Department (735-2184) a minimum of one business day in advance of any stage of construction specified therein for the purpose of inspection.

\_\_\_\_\_  
Date Issued

\_\_\_\_\_  
Chief/Deputy Chief Building Official