



TWO-UNIT DWELLING REGISTRATION

STEP 1 - ZONING COMPLIANCE

APPLICATION NUMBER	Date

BUILDING DIVISION

8850 McLaughlin Road, Unit 1
Brampton, ON L6Y 5T1

TO THE DIRECTOR OF BUILDING:
Pursuant to the City of Brampton Registration By-law 87-2015, the undersigned hereby applies for Zoning Compliance with respect to registration of a Two-Unit Dwelling.

ADDRESS OF DWELLING	STREET NO.	STREET NAME		
	LOT/BLK	PLAN/CON	REFERENCE PLAN (If Applicable)	
APPLICANT	NAME			
	STREET NO.	STREET NAME	UNIT NO.	PHONE NO.
	CITY	PROVINCE	POSTAL CODE	
	EMAIL			
PROPERTY OWNER	<input type="checkbox"/> SAME AS ABOVE			
	NAME			
	STREET NO.	STREET NAME	UNIT NO.	PHONE NO.
	CITY	PROVINCE	POSTAL CODE	
	EMAIL			
PRINCIPAL UNIT INFORMATION	<input type="checkbox"/> OWNER OCCUPIED DWELLING		TYPE OF DWELLING	
	<input type="checkbox"/> INVESTMENT DWELLING		<input type="checkbox"/> DETACHED HOUSE	
			<input type="checkbox"/> SEMI-DETACHED HOUSE	
			<input type="checkbox"/> TOWNHOUSE	
	SIZE OF PRINCIPAL UNIT (m ²)			
SECOND UNIT INFORMATION	SIZE OF SECOND UNIT (m ²)			
	LOCATION OF UNIT	<input type="checkbox"/> BASEMENT <input type="checkbox"/> FIRST FLOOR <input type="checkbox"/> SECOND FLOOR <input type="checkbox"/> OTHER _____		
COMPLETENESS OF APPLICATION				
This application is accompanied by the following plans and specifications:				
1. Legal Survey		<input type="checkbox"/> YES	<input type="checkbox"/> NO	
2. Site Plan (including location of driveway, A/C Unit and entrance to Dwelling)		<input type="checkbox"/> YES	<input type="checkbox"/> NO	
3. Dimensioned Floor Plan		<input type="checkbox"/> YES	<input type="checkbox"/> NO	
4. Appointment of Authorized Agent Form (if applicable)		<input type="checkbox"/> YES	<input type="checkbox"/> NO	
APPLICANT'S DECLARATION				
I, _____ do hereby declare the following:				
1. THAT I am	<input type="checkbox"/> the property owner as stated above, or			
	<input type="checkbox"/> the authorized agent for the owner			
2. THAT the statements made and the information provided herein are true and correct and are made and provided with full knowledge of the circumstances relating to this application				
_____ Applicant's Signature		_____ Date		

The personal information on this form is collected under the authority of City of Brampton Registration By-law 87-2015. The information will be used to determine Zoning Compliance regarding registration of a Two-Unit dwelling. Questions about the collection of personal information should be directed to Deanna Bremner, Supervisor of Administration, Building Division, telephone 905-874-2419.