

FLOWER CITY



BRAMPTON.CA

BUILDING DIVISION
8850 McLaughlin Road, Unit 1
Brampton, ON L6Y 5T1
Phone: (905) 874-2401
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PERMIT EXTENSION REQUEST APPLICATION

PERMIT REVOCATION REQUEST APPLICATION

DATE STAMP	PERMIT NUMBER	
	Accepted By:	Building File #:

Note: The attached sheet may be used to list other additional building permits.

A – Property and Scope of Work (Please Print)		
LOCATION		
	#	Street
		Unit/Suite
DESCRIPTION OF WORK (from permit)		

B – APPLICANT’S* REQUEST (Please Print) – must be completed by Applicant	
<p>The applicant is the person authorized to submit this request on behalf of the owner and/or authorized agent of the owner. State reason for which construction must be delayed and the anticipated date for commencing the construction or reasons for revocation request:</p> <p>REASON FOR REQUEST:</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
<p>I, _____ last name _____ first name _____</p> <p>of _____ # _____ street _____ apt/suite _____ city _____ province _____ postal code _____</p> <p>Email Address: _____ Phone Number: _____</p> <p>do declare that I am (choose one as appropriate):</p> <ul style="list-style-type: none"> .. the owner of the land that is the subject of the application .. the owner’s authorized agent (if the owner is a Corporation or Partnership I have the authority to bind the Corporation or Partnership) .. authorized to submit this application on behalf of the owner and/or authorized agent <p>_____ Signature _____ Date (yyyy-mm-dd) _____</p>	

C – FOR OFFICE USE ONLY (Please Print)				
Permit Issued Date:		Verified by Manager of Inspections:	Fee (if applicable):	
Permit Expiry Date:			Total:	
Construction Started:	<input type="checkbox"/> Y / <input type="checkbox"/> N		Receipt No.:	
Order On Property:	<input type="checkbox"/> Y / <input type="checkbox"/> N			
Previous Revocation or Deferrals:	<input type="checkbox"/> Y / <input type="checkbox"/> N	Date:		GRANTED / DENIED
Note/s:				

