



REQUEST FOR FILL 2018

PUBLIC WORKS AND INFRASTRUCTURES DEPARTMENT

100, chemin Old Chelsea

Chelsea, QC J9B 1C1

Telephone: 819-827-1160 - Fax: 819-827-2672

_____ 20__

To whom it may concern,

I hereby fully relieve the Municipality of Chelsea of all responsibility in case of damage, accident or other that could arise during the transportation and unloading of material to be used as fill on my property, located at # _____ on chemin _____. The work is being done at my request and is without cost to the Municipality of Chelsea (**attach a sketch showing where the fill will be deposited**).

Signature: _____

Name: _____

Address: _____

Home number: _____

Work number: _____

Quantity requested: _____