



Permit Request

Request started on: _____ Request Completed on: _____ Req. No

Entered by: _____

Permit Type: **Véranda**

Nature: _____

Identification

Owner	Applicant
Name: _____	Name: _____
Address: _____	Address: _____
City: _____	City: _____
Postal Code: _____	Postal Code: _____
Phone: _____	Phone: _____

Location

Roll No.: _____	Use Code: _____
Address: _____	Projected Use Code: _____
Zone: _____	Frontage: _____
Distinct P. of Land: <input type="checkbox"/>	Depth: _____
	Area: _____
	Number of Dwelling Units: _____
	Year of Construction: _____
Zoning Code: _____	Number of Stories: _____
Inspection Sector: _____	Floor Area m ² : _____
Service: _____	Number of Affected Units: _____
Cadastre: _____	

Work

Performer of the works	Responsible Person
Name: _____	Name: _____
Address: _____	Phone: _____
City: _____	
Postal Code: _____	
Phone: _____	Work Starting Date: _____
Fax: _____	Work Completion Target Date: _____
RBQ No.: _____	Completion Date: _____
NEQ No.: _____	Work Value: _____

Véranda

Dimension:

Height:

Establishment (distance)

Line of lot in front

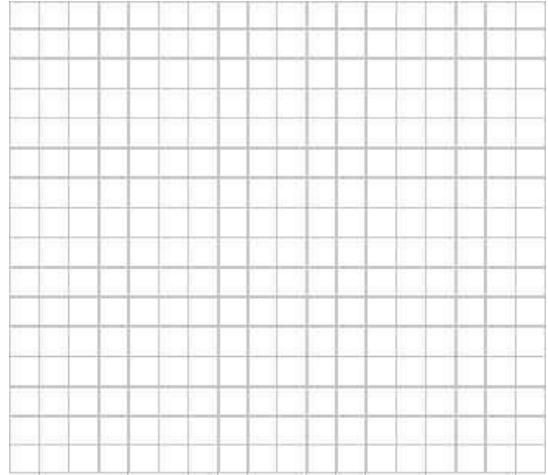
Side

Back:

Building:

Drainfield:

Septic Tank:



Required Documents	Receipt	Receipt Date
Coût estimé des travaux	<input type="checkbox"/>	
Plan d'implantation à l'échelle	<input type="checkbox"/>	
Plans de construction à l'échelle (2 copies)	<input type="checkbox"/>	
Présence d'un cours d'eau	<input type="checkbox"/>	
Présence d'une terre humide	<input type="checkbox"/>	
Présence d'une zone de mouvement de masse	<input type="checkbox"/>	

Work Description

Applicant's Signature

Applicant's Signature: _____

Date: _____