



Document Request Form

Applicant Information

Property Owners: _____ Applicant Name: _____
 Address: _____ Address: _____
 Municipality: _____ Municipality: _____
 Postal Code: _____ Postal Code: _____
 Phone Number: _____ Phone Number: _____
 Email Address: _____ Email Address: _____

If request is not the property owner, a completed Applicant Authorization Form is to be submitted with this request.

Property Information

Property Address: _____
 Building / Permit number of request: _____
 Reason for request: _____

Note: As the recipient of these drawings, it is your responsibility to ensure that they are not used for any purpose which contravenes the Copyright Act

Drawing emailed in PDF format on:

Drawing comprising part of the above noted building permit issued by the building department were taken out of the office by:

Name: _____

Company Name: _____

Date: _____

The Drawings will be returned on or before: _____

Name: _____ Signature: _____ Date: _____

For Office Use Only

Permit number(s)

Date Request received

Reason for release

Date drawings returned