

BUILDING DEMOLITION APPLICATION



APPLICANT INFORMATION:

DATE: _____

Applicant Name		Company Name (if applicable)		
Home Phone Number	Cell Phone Number	Fax Number	E-mail Address	
Apt. No. – Street No. Street Name/ P.O. Box – Rural Route		City	Province/Territory	Postal Code

PROPERTY OWNER INFORMATION:

Property Owner Name		Company Name (if applicable)		
Home Phone Number	Cell Phone Number	Fax Number	E-mail Address	
Apt. No. – Street No. Street Name/ P.O. Box – Rural Route		City	Province/Territory	Postal Code

CONTRACTOR INFORMATION:

Contractor Company Name		Contact Person Name		
Home Phone Number	Cell Phone Number	Fax Number	E-mail Address	
Apt. No. – Street No. Street Name/ P.O. Box – Rural Route		City	Province/Territory	Postal Code

ADDITIONAL CONTRACTOR INFORMATION:

Contractor Company Name		Contact Person Name		
Home Phone Number	Cell Phone Number	Fax Number	E-mail Address	
Apt. No. – Street No. Street Name/ P.O. Box – Rural Route		City	Province/Territory	Postal Code

PROJECT INFORMATION

Quarter: _____ Section: _____ Township: _____ Range: _____ Meridian/Extension: _____
 LSD: _____ Lot: _____ Block: _____ Plan: _____ Extension: _____

Disposal of Building Material: _____

Start Date: _____ Estimated Completion Date: _____

I, _____ of _____
(Please print) (City, Province)

in the Province of Saskatchewan, solemnly declare that all of the above statements within this application are true, and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of *The Canada Evidence Act*.

I further agree that _____, is appointed as the Agent in regards to this application and has
(Please print)

the authority to answer questions or inquiries shall be directed to him/her, and he/she shall be provided information by the RM of Sherwood No. 159 in regards to this application only. The Agent has my authorization to make decisions in his/her best judgment in regards to this application.

I hereby authorize the RM of Sherwood No 159 to enter my land for the purpose of conducting a site inspection in regards to this application.

The information on this form is being collected under the authority of section 28(a) of the Freedom of Information and Protection of Privacy Act and will be used solely for the purpose of the rezoning application.

I further agree to indemnify and hold harmless the Municipality from and against any claims, demands, liabilities, costs or damages related to the development undertaken pursuant to this application.

_____	_____
<i>Applicant Signature</i>	<i>Date</i>
_____	_____
<i>Property Owner Signature</i>	<i>Date</i>

Assigned Permit No.:
Date: