



DEVELOPMENT PERMIT APPLICATION FORM TOWN OF CLAREVILLE

99 Pleasant Street, Clareville NL A5A 1V9

Phone: (709) 466-7937 Fax: (709) 466-2276 Email: publicworks@clareville.net

PROPERTY INFORMATION

Development Location: _____ Date: _____

Property Owner's Name: _____ Phone: _____

Mailing Address: _____

Street Address *Unit #*

City *Province* *Postal Code*

DEVELOPMENT INFORMATION

- Development Type:
- | | | |
|--|--|---|
| <input type="checkbox"/> Single Family Dwelling | <input type="checkbox"/> Double Dwelling | <input type="checkbox"/> Row Dwelling |
| <input type="checkbox"/> Apartment Building | <input type="checkbox"/> Auxiliary Apartment | <input type="checkbox"/> Demolition |
| <input type="checkbox"/> Residential Renovations | <input type="checkbox"/> Residential Fence | <input type="checkbox"/> Accessory Building |
| <input type="checkbox"/> Commercial Interior Renovations | <input type="checkbox"/> Commercial Building | <input type="checkbox"/> Commercial Fence |
| <input type="checkbox"/> Commercial Exterior Renovations | <input type="checkbox"/> Other _____ | |

Building Contractor: _____ Excav/Site Contractor: _____

Electrical Contractor: _____ Plumbing Contractor: _____

Carpentry Contractor: _____ Painting Contractor: _____

Development Measurements

WIDTH	LENGTH	HEIGHT	SETBACK	LEFT SIDEYARD	RIGHT SIDEYARD	REARYARD	BUILDING SEPERATION

REMARKS

The following must accompany this application: *Legal Survey of Property, Building Plans (if applicable) and Payment of Applicable Fees (if applicable)*

APPLICANT SIGNATURE OF AGREEMENT

I hereby acknowledge that I have read this application, state the information herein is correct and will not commence construction until approval has been received by the Town.

PERMIT FEE

\$

CUSTOMER CODE

ESTIMATED COSTS

\$

Property Owner's Signature

CASHIER

CASHIER

VALIDATION

Public Works Approval