

Building Permit Application Information Form

Owner Name: _____ Email: _____
 Phone: _____ Company: _____
 Permanent Address: _____

Applicant Name: _____ Email: _____
 (If Different from owner) Phone: _____ Company: _____

Contractor Name: _____ Email: _____
 (If Different from owner) Phone: _____ Company: _____

Project Information

Civic Address of Project	Property Number (PID)	Lot or Unit Number
<input type="checkbox"/> New Construction <input type="checkbox"/> Addition <input type="checkbox"/> Alteration/Renovation <input type="checkbox"/> Pool <input type="checkbox"/> Change of Use <input type="checkbox"/> Fence <input type="checkbox"/> Accessory Building <input type="checkbox"/> Solar Panels <input type="checkbox"/> Demolition/Relocate <input type="checkbox"/> Deck <input type="checkbox"/> Other _____		
Description of Proposed Work		
Project Value \$	Proposed Start Date	

New Buildings Only

Number of Units	Number of Storeys		
Basement Type:	<input type="checkbox"/> Full	<input type="checkbox"/> Crawlspace	<input type="checkbox"/> Frost Wall Slab-on-Grade <input type="checkbox"/> Other (Describe):
Foundation Type:	<input type="checkbox"/> Concrete	<input type="checkbox"/> Pier	<input type="checkbox"/> ICF <input type="checkbox"/> Helical Pile <input type="checkbox"/> Other (Describe):
Heating Type:	Oil: <input type="checkbox"/> Baseboard <input type="checkbox"/> Forced Hot Air <input type="checkbox"/> In-Floor	Other:	
	Electric: <input type="checkbox"/> Baseboard <input type="checkbox"/> Heat Pump <input type="checkbox"/> In-Floor		
Electrical Service:	<input type="checkbox"/> 100A <input type="checkbox"/> 200A <input type="checkbox"/> 400A <input type="checkbox"/> 600A	<input type="checkbox"/> 1-Phase <input type="checkbox"/> 3-Phase	Other:
Transformer Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Solar Panels being Installed <input type="checkbox"/> Yes <input type="checkbox"/> No	Electric Car Plug Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Heat for Less Program <input type="checkbox"/> Yes <input type="checkbox"/> No
New Lot: Currently serviced with water/sewer <input type="checkbox"/> Yes <input type="checkbox"/> No	Required service sizes Water: _____ Sewer: _____		Sprinkler Service <input type="checkbox"/> Yes <input type="checkbox"/> No
New Driveway Access Required <input type="checkbox"/> Yes, Length: _____ <input type="checkbox"/> No	Curb Cut Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Culvert Required <input type="checkbox"/> Yes, Length: _____ <input type="checkbox"/> No	

I DO SOLEMNLY DECLARE:

1. That the statements and information contained in this form are true and made with full knowledge of the circumstances connected with the same.
2. That the information, plans and specifications prepared and submitted are for the construction or alteration for the project described.
3. That the site plans submitted correctly set out the dimensions and the area of the lands described on this form and the relation of the location of the proposed project to the street and property lines.
4. That I know of no reason why a permit should not be granted to me in pursuance of the said application, and making this declaration conscientiously believing it to be true.
5. I waive all rights or actions against the City of Summerside and/or its officers, agents, or employees in respect to negligence or any damages which may be caused through the enforcement of any provisions in any of the City Bylaws or for the revoking of a permit for any cause or irregularity of nonconformity with the Bylaws or regulations adopted by the City of Summerside.

Signature Of Applicant: _____ Date: _____