



Application Date: _____

REQUEST FOR BUILDING PERMIT INFORMATION
(for single family residential properties within the City of Parksville)

OWNER/APPLICANT:

Name: _____

Address: _____

City Province Postal Code

Email: _____ Phone/Cell #: _____

*All requests for building permit information must be signed by **all registered property owner(s)**.

Signature of Owner _____

Print Name _____

Date: _____

Signature of Owner _____

Print Name _____

Date: _____

LEGAL DESCRIPTION OF PROPERTY:

PID: _____ Civic Address: _____

Legal Description: _____

Lot No.

District Lot

Plan No.

REQUEST FOR:

Historic House Plans for current owner (single family residential)	<input type="checkbox"/> \$40 (11x17 paper copy)
Occupancy Permit (copy)	<input type="checkbox"/> \$30 (paper copy)
TOTAL FEES:	\$

There is a minimum one week processing time for all property information requests.

Building Inspector Approval

Date