



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"/> \$100 (paper copy) <input type="checkbox"/> \$40 (USB flash drive)	
Occupancy Permit (copy)	\$ 30	
Other – (Copies .50/page, colour copies \$2/per page)	\$	Details:
TOTAL FEES:	\$	

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

Building Inspector Approval

Date

Personal information is collected under authority of the Land Title Act, Local Government Act, Strata Property Act and Freedom of Information Act (British Columbia) and will only be used for the purpose of processing the development permit application and ancillary documentation. For further inquiries please contact the City's Freedom of Information Coordinator at 250 954-4660.