

ENGINEERING DEPARTMENT SERVICES

ENGINEERING SERVICES:

- Sanitary Sewer Underground Sprinkler System/Backflow Device Storm Sewer Water Service
 Access Other _____ 2nd Water Meter

PROPERTY DETAILS:

Property Address	Street				PID
Legal Description	Lot No.	Block No/Section.	District Lot No.	Plan No.	Roll #

PROPERTY OWNERSHIP DETAILS (as shown on State of Title Certificate):

Registered Owner(s) or Company Name(s)					Contact Telephone Number
Address	Street	City	Province	Postal Code	Email

CONTRACTOR DETAILS:

Contractor/ Company Name(s)			Business Licence #	Contact Telephone Number	
Company Address	Street	City	Province	Postal Code	Email

REGISTERED OWNER(S) DECLARATION:

I acknowledge that as the owner of the land in respect of which this permit is issued, I am solely responsible for carrying out the work authorized by this permit in accordance with the City of Parksville Standards and Specifications and other applicable laws respecting safety, and that I am solely responsible for determining whether the land may be subject to flooding or other natural hazard. I acknowledge that as owner of the land, I am solely responsible for determining whether the work authorized by this permit contravenes any covenant, easement, right-of-way, building scheme or other restriction affecting the building site and whether the work requires the involvement of an engineer or geoscientist under the *Engineers and Geoscientists Act*.

I acknowledge that the City of Parksville provides a limited monitoring service in relation to construction and does not, by accepting or reviewing plans, inspecting construction, monitoring the inspection of construction by others, or issuing permits, make any representation or give any assurance that the construction authorized by this permit complies in every or any respect with applicable laws respecting safety.

If the City of Parksville has so indicated on this permit, I acknowledge that the City has issued the permit in reliance on the certification of a registered professional, engaged by me to provide such a certification, that the plans for the work authorized by the permit comply with the City of Parksville Standards and Specifications and other applicable enactments. I acknowledge that the City of Parksville, by issuing this permit or any other permit, makes no representations to me or any other person as to any such compliance.

Personal information will only be used for the purpose of processing the permit application and administration and enforcement of the City of Parksville Standards and Specifications and ancillary legislation relating to construction in connection with the above described property. For further enquiries please contact the City's Freedom of Information Coordinator at PO Box 1390, 100 Jensen Avenue East, Parksville, BC, V9P 2H3 or by telephone at 250 954-3070.

Signature of Owner(s) _____ Print Name(s) _____
Date _____

Engineering Department
 100 Jensen Avenue East, PO Box 1390, Parksville, BC V9P 2H3
 General Inquiries: 250 951-2484 Email: engineering@parksville.ca