BUILDING CONTROLS AND BY-LAW ENFORCEMENT LICENCE APPLICATION CONFIRMATION LETTER



Name of Applicant:		
Address of Applicant:		
Business Name:	No. Street	City/Town Postal Code Phone No:
Type of Operation:	Mobile Food Premise Adult Entertainment Establishment MTO Garage Approval Other	Salvage Yard Public Entertainment
Address of Operation:		
Legal Description:	No. Street	City/Town
Assessment Roll #:	Lot Concession	Municipality
Building Division: Conforms to Zoning:	☐ Yes ☐ No Zoning :	
Outstanding Orders: Comments:	Yes No Related to L	icence: Yes No
	Reviewed By:	
	C	ounty Building Official Date:
		Date
By-law Inspection: Inspection Date: Conforms to Licensing By-law: Yes No		
Outstanding Orders: Comments:	Yes No Approval Rec	commended: Yes No
	Reviewed By:	
		County By-law Officer
		Date: