



# LAMI TOWN COUNCIL

File No \_\_\_\_\_  
Ass. No \_\_\_\_\_

## LAMI TOWN COUNCIL

### Application For Amended Plan/Service Fee/Temporary Sheds/Sanitary License, General Provision/Renewal Permit/Vehicular Crossing/Banner Application/Photocopy Charges/Renewal & Stamping of House Plan/Re-inspection

Name of owner \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Name of Builder \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Location of proposed work: House No \_\_\_\_\_ Street \_\_\_\_\_  
Certificate of Title / Crown Lease No \_\_\_\_\_ Lot \_\_\_\_\_ Section \_\_\_\_\_  
Reference No. \_\_\_\_\_  
Zoning (Residential, Commercial, Industrial, Civic) \_\_\_\_\_  
Fee \_\_\_\_\_ Rec.No \_\_\_\_\_ Date \_\_\_\_\_

#### ITEMS TO BE PREPARED (Plan to be submitted where necessary)

I declare that to the best of my knowledge and belief the foregoing particulars are correct in every detail and if this is approved the work will be carried out in accordance with regulations and requirements of the Council. I also further declare that the above house has not been served with closing order from Health Department. I understand that if the foregoing information is subsequently found incorrect then the approval given will be invalid.

\_\_\_\_\_  
Date Signature of Owner or Address  
Authorized Agent Phone \_\_\_\_\_

\*\*Note: If there has been a recent change of ownership not registered with the Council please produce evidence of ownership and name of previous owner.

#### FOR OFFICIAL USE ONLY

CASHIER \$ \_\_\_\_\_  
ACCEPT FEE

OFFICERS'S  
COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
BUILDING  
SURVEYOR  
Date: \_\_\_\_\_