

Application for On-site Services Permit

An On-site Services Permit is required to install sanitary, storm and water services outside of a building. For more information about building requirements, visit www.portcoquitlam.ca/building

TO BE COMPLETED BY APPLICANT

I/We hereby make application and provide drawings under the provisions of the pertinent Bylaws for permission to construct, repair or alter the following building or structure and agree to comply with all requirements of the Bylaws and to indemnify and keep harmless the City against all claims, liabilities, judgments, costs, and expenses of whatever kind, which may in any way accrue against the said City in consequence of, and incidental to, the granting of this Permit, if issued.

Application Date: _____

Building Site Address (incl. postal code): _____

Partial Legal Description: Lot # _____ Plan # _____

Property Owner: _____

Owner Address (incl. postal code): _____

Owner Email: _____ Owner Phone: _____

Contractor Name/Company: _____

Contractor Address (include postal code): _____

Contractor Email: _____ Contractor Phone: _____

Applicant (Primary Contact) Owner (info above) Contractor (info above)

Applicant Name: _____

Applicant Address: _____

Applicant Email: _____ Applicant Phone: _____

SERVICES

Backflow Preventer	# _____	Interceptor	# _____	Rain Water Leader	_____
Catch Basin	# _____	Lawn Drain	# _____	Sump	_____
Fire Hydrant	# _____	Manhole	# _____	Trench Drain	_____
Floor Drain	# _____	Pump Chamber	# _____	Water Meter	_____
Domestic Water	_____ m	Fire Line	_____ m	Sanitary Sewer	_____ m
Storm Sewer	_____ m	Other:	_____		_____

APPLICANT ACKNOWLEDGEMENT

The undersigned make this application to the Director of Development Services, have fulfilled the complete application requirements, and agree to pay any additional costs incurred by the City for services in processing the application.

Authorized Signature: _____ Date: _____

Print Name: _____

Note: Any documentation of information relating to the application that is in the custody or control of the City is subject to the Freedom of Information and Protection of Privacy Act (B.C.)

OFFICE USE ONLY

Permit #s BP: _____ PF00: _____ FP00: _____ Fee Paid: _____ Receipt#: _____

Cheque Cash Visa MC AMX Interac CSR Initials _____