

Permanent or Temporary Shipping Container Application Form

This is NOT a Permit

			1 1113 13					
Date o	of Application							Page 1 of 1
PROJECT INFORMATION	*Building Address (include Unit #)				Legal Descrip	tion Block	Plan	
	*Is there the potential hazardous or flame	•	Yes □ No □		# of Units			Proposed length of t
PROPERTY OWNER	*Contact Name/Company Name				*Email:			
	Address			City		Province	ſ	Postal Code
	*Phone Number	er Fax Number			-	Cell	-	-
	*SIGNATURE OF F OWNER:	REGISTERED	x					
APPLICANT	*Contact Name/Company Name					*Email:		
	Address	_		City		Province	F	Postal Code
	*Phone Number	er Fax Number			-	Cell	Cell	
SUBMIS	SSION REQUIREME	ENTS						
1 copy – Building Dept.							Submitted	Received (office use only)
ite Plan/Key Plan		Required for ALL PERMIT APPLICATIONS						

Applicant Signature Date

Development Act. I further declare that the submission of this application does not give permission to begin work on this project.

Yorkton Bylaws and/or Provincial laws regulating Building and Occupancy and all Building / Fire Code Requirements. The issuance of a building permit does not relieve the owner and authorized agents from complying with the requirements of the current National Building / Fire Codes, as amended and within the scope of *The Construction Codes Act, The Building Code Regulations, The Fire Prevention Act and Planning and*

The personal information being collected on this form is for the purpose of processing and acting upon this application in accordance with City of Yorkton Building Bylaw 16/2012, and is protected by the privacy provisions of *The Local Authority Freedom of Information and Protection of Privacy Act.* If you have any questions about the collection, use and disclosure of your personal information in this process, please contact the City Clerk for the City of Yorkton at 306-786-1717.