

Temiskaming Municipal Services Association BUILDING DEPARTMENT 35-A 10th St. Box 51 Earlton, On P0J1E0 705-563-2426

BUILDING PERMIT MUNICIPAL SIGN-OFF

OWNER: PROJECT:
PLANNING AND ZONING COMPLIANCE CHECKLIST
PROPERTY ZONING: PERMITTED USE? Y / N
THE PROPOSED PROJECT COMPLIES WITH THE EXISTING ZONING Y / N
(IF NO. PROVIDE REASON NON-COMPLIANCE IS PERMITTED AND ATTACH ALL SUPPORTING DOCUMENTATION)
SETBACKS:
MIN INT INT/EXT REAR FRONT
ACTUAL INTINT/EXTREARFRONT
LOT COVERAGE? Y / N BLDG SEPARATION? Y / N BLDG HEIGHT? Y / N
MINOR VARIANCE? Y / N if yes, state conditions:
PERMIT APPLICATION
Req'd Fields Completed Designer Info Signed Roll # added
Drawing / Spec Incl. Drawings to be picked up
Property has recently transferred previous owner:
Additional comments:
Clerk:

I am aware that the Chief Building Official (CBO) is relying upon this form and the facts stated herein in issuing a building permit and I am further aware that the CBO may issue a building permit based, in part, in reliance upon the truth and complete accuracy of the foregoing.