

CITY OF LLOYDMINSTER BUILDING PERMIT

Permit Number

Permit Applicant Type: Owner Contractor New Home Buyer F	Protection Act Registration Number (NHBPA):
Application Date (M/D/Y):	City Issued DP App # City Issued BP App #
Estimated Completion Date (M/D/Y):	- Tax Roll # City Issued BP #
APPLICANT INFORMATION	Who is paying permit application fees? Owner Contractor
Owner Name:	Contractor Name:
Mailing Address:	Mailing Address:
City: Prov:	
Postal Code: Phone:	Postal Code: Phone:
Alt Phone: Fax:	Alt Phone: Fax:
Email Address:	Email Address:
Architect and/or Engineer (if applicable):	Phone:
Mailing Address:	
SITE INFORMATION	
Civic Address of Property to be Developed:	
Lot: Block: Plan: Subdivi	rision Name:
CONSTRUCTION INFORMATION	
Project Information: Commercial Residential Multi Family Industrial Institutional Type of Work: New Addition Renovation Accessory Building Basement Dev. Manufactured Home Secondary Suite Wood Stove Deck Demolition Change of Use Other Building Classification: Sq. meters Sq. feet No. of Stories: Main Floor Area: Basement Area: Developed Yes No Garage Area: Detached Attached APPLICATION TERMS & CONDITIONS Terms and Conditions: I hereby agree that I have read this application and state that the above is correct and agree to comply with all City Bylaws and/or Provincial Laws which are applicable to this application. It is expressly understood that the issuing of a building permit and review of plans does not relieve the applicant or owner from complying with all Bylaws, though not called for in the specifications or shown on the plans or information submitted and/or this application. Approval is subject to compliance with the conditions under which the Building Permit has been issued. Failure to comply with all the conditions of approval and/or construction regulations of the City of Lloydminster, or any deviation from information or plans submitted will result in a Stop Work Order being Issued.	
	ermit Applicant Signature Owner's Signature
PERMIT FEES & PAYMENT INFORMATION (For Office Use Only)	
Construction Value: \$	Permit Fee: \$
Payment Method: Visa M/C Debit Cheque Cash	Cheque Number / Authorization:
Credit Card #:	Expiry Date: Date of Authorization:
Name of Cardholder:	Signature of Cardholder:
PERMIT VALIDATION SECTION (For Office Use Only)	Inspecting SCO:
Special Conditions:	
SCO's Name (print or type)	SCO's Signature
SCO's Designation Number	-

