	PERS – Application for Building Pe	Planning, Engineering rmit & Regulatory Services				
ST. J@HN'S	Application for Building Permit					
Internal Use Only	l	SECTION 1				
Application Number	Property Class	Structural Type				
Application Set Up Information						
Project Information		SECTION 2				
Civic Address		Lot #				
Business Name	Business Name Project Value Estimate (\$)					
(if applicable)						
Purpose of Application		SECTION 3				
New Construction	Extension/Addition	Renovation/Alternation				
Demolition	Change of Occupancy	Repair				
Each new construction project requires the submission of a separate application form						
Application Type		SECTION 4				
Dwelling	Apartment/Secondary Suite	Commercial Building				
Patio/Deck	Fence	Accessory Building				
Pool/Hot Tub	Site Work/Driveway	Sign				
Wood Stove/Fireplac	e Home Office	Other (describe below)				
Detailed description of proposed work:						
		-				



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Owner Contact Information			SECTION 5			
Name						
Address		Postal Code				
Phone (Home)						
Email Address						
Note: Name of property owner must match that listed on the City of St. John's Assessment Roll						
Applicant Contact Information (if di	fferent from owner)		SECTION 6			
Name						
		Postal Code				
Phone (Home)						
Email Address						
Contractor/Consultant Contact Info	rmation (Optional)		SECTION 7			
Name			L			
	Postal Code					
Phone (Home)						
Email Address						
Applicant Signature of Agreement			SECTION 8			
I hereby submit this application and confirm that the information supplied is, to the best of my knowledge, correct. I agree to comply with all City Regulations & By-Laws, agree to develop in accordance with the plans approved by the City of St. John's and not to commence development without applicable written approval and permits from the City of St. John's. In addition, I acknowledge that I have reviewed this application and agree to provide any additional information requested and to pay all applicable fees as noted on the City's fee schedule (www.stjohns.ca). To view these fees, please click on the link below that pertains to your application:						
Inspection Services Fees and Rate	<u>s</u>					
Note: Where the applicant and property owner are not the same, the signature of the property owner is required before the application can be accepted for processing.						
Applicant Signature		Date (yyyy-mm-dd)	-			
Property Owner Signature						
Staff Signature		Date (yyyy-mm-dd)				



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Privacy Notice			SECTION 9		
Collection of Personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to process your Permit Application. Questions about the collection and use of the information may be directed to the Manager of the Regulatory Services Division, by email: <u>building@stjohns.ca</u> or by phone 709-576-8565.					
Please send completed form to:	Inspection Services 3 rd floor Annex 10 New Gower Street P.O. Box 908 St. John's, NL A1C 5M2		For further information: Phone: 709-576-8565 Fax: 709-576-8160 Email: <u>permits@stjohns.ca</u>		

