



PLEASE PRINT

CITY-1003 Building Permit & Development Application Form

BUILDING/DEVELOPMENT

PROPERTY LOCATION INFORMATION:

SECTION 1

Civic #: Street Name: Lot #:

Suite /Floor: Subdivision:

Account #: Date (yyyy/mm/dd)

CONTACT INFORMATION (to be completed by the applicant):

SECTION 2

Applicant: \_\_\_\_\_
Mailing Address: \_\_\_\_\_
Postal Code \_\_\_\_\_
Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_
(Fax) \_\_\_\_\_ (Cell) \_\_\_\_\_
email: \_\_\_\_\_

Property Owner: \_\_\_\_\_
Mailing Address: \_\_\_\_\_
Postal Code \_\_\_\_\_
Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_
(Fax) \_\_\_\_\_ (Cell) \_\_\_\_\_
email: \_\_\_\_\_

Contractor: \_\_\_\_\_
Mailing Address: \_\_\_\_\_
Postal Code \_\_\_\_\_
Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_
(Fax) \_\_\_\_\_ (Cell) \_\_\_\_\_
email: \_\_\_\_\_

Consultant: \_\_\_\_\_
Mailing Address: \_\_\_\_\_
Postal Code \_\_\_\_\_
Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_
(Fax) \_\_\_\_\_ (Cell) \_\_\_\_\_
email: \_\_\_\_\_

PROJECT INFORMATION: (supplemental to SECTION 1)

SECTION 3

Tenant, Occupancy, Trade Name:

Building Floor Area: \_\_\_\_\_ Project Floor Area: \_\_\_\_\_
Property/Lot Area: \_\_\_\_\_ # On Site Parking Spaces: \_\_\_\_\_
# Employees: \_\_\_\_\_

TICK BOX IF THIS PROJECT INCLUDES:

- Electrical Work: [ ] Private Well Installation [ ] (Must be Drilled)
Plumbing Work [ ] Private Septic Installation [ ] (GSC Approval Required)
Culvert Installation [ ] (Must be approved by streets department)

DESCRIPTION OF PROJECT: \_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

ESTIMATED COST OF PROJECT: \$

PLEASE TURN OVER AND SIGN SECTION 4: NOTE: THIS APPLICATION WILL NOT BE PROCESSED WITHOUT SIGNATURE

Please send completed form to: Access St. John's, First Floor City Hall
P.O. Box 908,, 10 New Gower Street
St. John's NL A1C 5M2

For further information:
email: service@stjohns.ca
call: 3-1-1
Where 3-1-1 is unavailable, call 709-754-CITY (2489)

APPLICANT SIGNATURE OF AGREEMENT

SECTION 4

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 as requested.

**NOTE: Where the applicant and property owner are not the same, the SIGNATURE of the Property Owner may be required before the application can be accepted for processing.**

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Date: \_\_\_\_\_

This application has been reviewed and accepted for processing:

Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR INTERNAL USE ONLY

SECTION 5: STAFF USE ONLY

Application processing fees are non-refundable once the application has been accepted for processing, regardless of the decision of the St. John's Municipal Council or City Staff with respect to approval of the application. Additional fees, assessments, or charges may apply to certain types of applications. In these cases, the applicant will be advised by City staff of any fees, assessments, or charges as the application is processed.

Processing Fee:

Budget Number:

Building and Property Mangement

Engineering and Planning

Roll #: \_\_\_\_\_

File No.: \_\_\_\_\_

Class: \_\_\_\_\_ Work Type: \_\_\_\_\_

Structure Type: \_\_\_\_\_ Sub Type: \_\_\_\_\_

Plans Examiner: \_\_\_\_\_

Inspector: \_\_\_\_\_

File No. \_\_\_\_\_

Appl Type: \_\_\_\_\_

Date Entered: \_\_\_\_\_

Staff Initials: \_\_\_\_\_

Use: \_\_\_\_\_

Land Use Zone: \_\_\_\_\_

Permitted Use: \_\_\_\_\_ Discretionary Use: \_\_\_\_\_ Change to Non conforming Use: \_\_\_\_\_

Heritage Area OR Designated Building: YES \_\_\_\_\_ AREA \_\_\_\_\_ NO \_\_\_\_\_

Dept of Historic Resources (Archeological Div) Notification Req'd: YES \_\_\_\_\_ NO \_\_\_\_\_

City Services: Water YES \_\_\_\_\_ NO \_\_\_\_\_

San Sewer YES \_\_\_\_\_ NO \_\_\_\_\_

Storm Sewer YES \_\_\_\_\_ NO \_\_\_\_\_

Street Excavation Permit Required YES \_\_\_\_\_ NO \_\_\_\_\_

FEES CHARGES REQUIRED:

NOTES:

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