



Brokenhead River Planning District

Telephone: (204) 268-6705

Fax: (204) 268-1504

R.M. of Brokenhead Municipal Office Building

P.O. Box 1330
BEAUSEJOUR, Manitoba
R0E 0C0

APPLICATION FOR BUILDING PERMIT

The undersigned hereby applies for a Permit to build in accordance with this application; all by-laws and regulations applicable hereto, and all conditions stated on the reverse. The accuracy of the information which follows and the accompanying plans and specifications with the representations therein contained are the responsibility of the owners and are hereby made a part of this application.

OWNER: _____

Address: _____ Telephone: _____

APPLICANT: _____

Address: _____ Telephone: _____

LOCATION OF PROPERTY: (civic address) _____

Roll # _____

LEGAL DESCRIPTION OF PROPERTY: _____

DESCRIPTION OF WORK: _____

CLASS OF WORK

1) NEW <input type="checkbox"/>	4) RECONSTRUCTION <input type="checkbox"/>	7) DEMOLITION <input type="checkbox"/>
2) ADDITION <input type="checkbox"/>	5) RELOCATION <input type="checkbox"/>	8) CHANGE IN OCCUPANCY <input type="checkbox"/>
3) ALTERATION <input type="checkbox"/>	6) REMOVAL <input type="checkbox"/>	9) FACTORY BUILT RELOCATABLES <input type="checkbox"/>

VALUATION OF WORK: _____ **DOCUMENTS IN DUPLICATE:** BLUEPRINTS _____ SITE PLAN _____

CONTRACTOR: _____

Address: _____ Telephone: _____

ARCHITECT / ENGINEER / DESIGNER: _____

Address: _____ Telephone: _____

Signature of Owner/Applicant _____

Date _____