


Request for Building Permit Information Package

Email: lgardiner@georgina.ca mzhan@georgina.ca	TOWN OF GEORGINA  26557 Civic Centre Road Keswick, ON L4P 3G1	Fax to: _____ Fax #: _____ Phone: 905-476-4301 (Building Div) Fax: 905-476-4394
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Date Submitted: _____	Roll #: _____
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A. Project information:

Building number, street name	Unit number	Lot/con.
Municipality	Plan number/other description	

B. Requested by: Owner or Other

Last Name	First Name	Corporation or Partnership
Mailing Address	Town/Province	Postal Code

Telephone number ()	Fax ()	Cell Number ()	Email
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C. Method of Delivery: Phone (for pickup) Fax Email Mail

D. Proposed Construction:

<input type="checkbox"/> Single Detached Dwelling	<input type="checkbox"/> Boat House	<input type="checkbox"/> Attached Garage/Carport
<input type="checkbox"/> Shed <input type="checkbox"/> over 108 sq ft <input type="checkbox"/> under 108 sq ft	<input type="checkbox"/> Detached Garage/Carport	<input type="checkbox"/> Addition
<input type="checkbox"/> Pool <input type="checkbox"/> above ground <input type="checkbox"/> inground <input type="checkbox"/> onground	<input type="checkbox"/> Farm Building with/without declaration	
<input type="checkbox"/> Deck under/over 2 ft above grade		

Proposed Use: _____ Proposed Livestock Count: _____

E. Proposed Site Plan (Draft):

Show property lines including street location, location of existing buildings, proposed location of new buildings, and a north arrow. A current copy of your survey with the proposed construction indicated can be used in lieu of a sketch. **Highlight new construction.**