



Application for a Swimming Pool Enclosure Permit

Town of Halton Hills By-law #2009-0028

For use by Principal Authority	
Application number:	Permit number (if different):
Date received:	Roll number:

Application submitted to: Town of Halton Hills
(Name of municipality, upper-tier municipality, board of health or conservation authority)

A. Project information			
Building number, street name	Unit number	Lot/con.	
Municipality	Postal code	Plan number/other description	
Project value est. \$	Area of work (m ²)		
B. Applicant			
Applicant is: <input type="checkbox"/> Owner or <input type="checkbox"/> Authorized agent of owner			
Last name	First name	Corporation or partnership	
Street address	Unit number	Lot/con.	
Municipality	Postal code	Province	E-mail
Telephone number	Fax	Cell number	
C. Owner (if different from applicant)			
Last name	First name	Corporation or partnership	
Street address	Unit number	Lot/con.	
Municipality	Postal code	Province	E-mail
Telephone number	Fax	Cell number	
D. Description of Proposed Work			
E. Declaration of applicant			
I _____ certify that:			
<small>(print name)</small>			
1. The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge. 2. I have authority to bind the corporation or partnership (if applicable).			
_____	_____		
<small>Date</small>	<small>Signature of applicant</small>		

Personal information is collected under the authority of the Municipal Act 2001, S.O. 2001 c.25 and will be used for the process and issuance of Building Permits, in accordance with the collection, use and disclosure of personal information governed by the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c.M.56.



Owner's Authorization

Property Owner(s) to complete the Owner's Authorization form to allow the Agent/Applicant to prepare, submit and act on behalf of the Property Owner(s) with respect to this application.

Property Address: _____

Project Description: _____

I/We _____ the Owner(s) of the land being subject of this Application do hereby authorize and appoint

_____ as my/our Agent to **make this application** on my/our behalf and to conduct all communications on my/our behalf respecting same.

Name of Property Owner (please print)

Signature of Property Owner

Date of Signature

The personal information on this form is collected under the authority of Section 11 of the Municipal Act, as amended, and in accordance with the Municipal Freedom of Information and Protection of Privacy Act. The information is used for the purpose of processing this document. Questions regarding the collection of this information should be directed to Building Services at 905-873-2600 ext. 2300.

Office use only:

Picture Identification – Administration Verified Name

Picture Identification – Administration Verified Picture

Vailtech – Administration Verified