

SCHEDULE 'H-2' OF BYLAW NO. 630

COLUMBIA SHUSWAP REGIONAL DISTRICT
 781 MARINE PARK DRIVE NE, BOX 978 SALMON ARM BC V1E 4P1
 TELEPHONE: (250) 832-8194 FAX: (250) 832-3375

APPLICATION FOR A PLUMBING PERMIT

BUILDING PERMIT NO.	PERMIT FEE	PLUMBING PERMIT NO.
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1. LEGAL DESCRIPTION	LOT	BLK.	SEC.	TWP.	RANGE	DL	LAND DISTRICT	PLAN NO.
2. STREET ADDRESS								
3. REGISTERED OWNER(S)						MAILING ADDRESS		PHONE NUMBER
4. PLUMBING CONTRACTOR						MAILING ADDRESS		PHONE NUMBER
5. USE OF BUILDING (BCBC Classification)						NUMBER OF FIXTURES:		NUMBER OF STOREYS:
6. DESCRIBE WORK <input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> Repair								
7. WRITTEN DESCRIPTION:								
8. IS CONTRACTOR A CERTIFIED TRADESMAN? <input type="checkbox"/> YES T.Q. NO. <input type="checkbox"/> NO: PROVIDE DETAILED SCHEMATIC								

NOTICE

I, the undersigned, being the Owner, or Agent of the owner, of the parcel herein described, apply for a Permit to perform the work detailed in this application. I acknowledge that I have obtained and read Columbia Shuswap Regional District Building Regulation Bylaw No. 630.

I further acknowledge that this Permit is issued in accordance with the provisions of Building Regulation Bylaw No. 630 and in reliance on the representations and aforementioned acknowledgements made by the undersigned.

SIGNATURE OF OWNER OR AGENT

DATE

FOR OFFICE USE ONLY

APPROVED FOR ISSUANCE BY

Signature Date