



### PROJECT INFORMATION

Class of Work	Type of Building	Building Address	<input type="text"/>	
<input type="radio"/> New	<input type="radio"/> Residential	Office Use Only		
<input type="radio"/> Alterations	<input type="radio"/> Garage	Roll #	<input type="text"/>	
<input type="radio"/> Addition	<input type="radio"/> Commercial	Lot	Block	Plan
<input type="radio"/> Relocation	<input type="radio"/> Institutional	Value of Project	<input type="text"/>	Estimated Start Date
<input type="radio"/> Repair	<input type="radio"/> Industrial	Size of Building	<input type="text"/>	
<input type="radio"/> Demolition	<input type="radio"/> Sign	Height	<input type="text"/>	# of Stories
<input type="radio"/> Removal		Zoning	<input type="text"/>	Occupancy Group
			<input type="text"/>	<input type="text"/>

Description

### APPLICANT/PROPERTY OWNER

Contact Name  Company Name (if applicable)   
 Address  City  Province   
 Postal Code  Phone Number  Email

### CONTRACTOR

Contact Name  Company Name (if applicable)   
 Address  City  Province   
 Postal Code  Phone Number  Email

### PROFESSIONAL

Contact Name  Company Name (if applicable)   
 Address  City  Province   
 Postal Code  Phone Number  Email

APPLICATION INFORMATION (3 sets of drawings required for Commercial - 2 paper, 1 digital)	SUBMITTED?		
	Yes	No	To Follow
Site Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floor Plans/Elevations/Cross Sections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical/Electrical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ventilation Design Sheets (residential only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shop Drawings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional Design (sealed drawings)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all City Bylaws and/or Provincial Laws regulating buildings.

It being expressly understood that the issuing of a permit does not relieve the applicant from complying with all Bylaws, though not called for in the specifications or shown on plans and/or application submitted.

Applicant   
 Date   
 Received by   
 Date

**Return to the City of North Battleford, Building and Licensing Department**  
 1291-101<sup>st</sup> Street, North Battleford, Saskatchewan, S9A 2Y6 Phone: 306-445-1700

How should the City contact you?  
 Email  
 Phone

Send permit to:  
 Applicant/Property Owner  
 Contractor  
 Professional