

BASEMENT DEVELOPMENT PERMIT APPLICATION

1060 Hwy 26, St. François Xavier, MB, R4L 1A5 • Phone: 204-864-2092 • building@rm-stfrancois.mb.ca • www.rm-stfrancois.mb.ca

PROPERTY INFORMATION

JOB SITE CIVIC ADDRESS: _____

LEGAL DESCRIPTION: PARCEL _____ LOT _____ BLOCK _____ PLAN _____

CONTACT INFORMATION

LAND OWNER INFORMATION

Owner Name: _____

Address: _____ Postal Code: _____

Phone Number: _____ Email: _____

APPLICANT INFORMATION

Same as Owner

Applicant Name: _____

Address: _____ Postal Code: _____

Phone Number: _____ Email: _____

CONTRACTOR INFORMATION

Same as Applicant

Contractor Name: _____

Address: _____ Postal Code: _____

Phone Number: _____ Email: _____

REQUIRED INFORMATION

Existing Plumbing: YES NO Secondary Suite: Yes NO Estimated Value: _____

Fireplace: YES NO Kitchen: Yes NO Square Footage: _____

Description of work(s): _____

REQUIRED SUPPORTING DOCUMENTS

Detailed Floor Plan *
(Digital Copy (pdf))

*Must be to scale and include: interior walls and hallways, bathrooms, windows and doors (with sizes) any appliances (stoves, refrigerators, water heaters etc), interior features (saunas, hot tubs, fireplaces etc.) and the intended use of rooms/areas.

DECLARATION

I hereby acknowledge that if granted a permit pursuant to my/our application, that it is my/our responsibility to ensure compliance with the Building Code, Building Bylaw and any other applicable enactment, code, regulation or standard relating to the work in respect of which the permit is issued, whether or not said work is undertaken by me/us or by those whom I/we retain or employ to provide design and/or construction services.

I hereby acknowledge that additional documentation may be required at the request of the development officer prior to the approval of my/our application.

I hereby certify that I am the owner or duly authorized agent (authorization attached) of the land on which this building /development is proposed and make application for Permit(s) as set out;

Applicant Name: _____

Applicant Signature: _____ Date: _____

OFFICE USE ONLY

ADDITIONAL REQUIRED DOCUMENTATION

Proof of Ownership

Letter of Authorization

Other _____

BUILDING PERMIT #: _____ ROLL #: _____ ZONING: _____ DATE OF SUBMISSION: _____

PLUMBING PERMIT #: _____ FRONT SETBACK: _____ SIDE SETBACK: _____ REAR SETBACK: _____