Planning, Engineering and Development

City of Mount Pearl	Telephone: (709) 748-1000
3 Centennial Street	E-mail: planning@mountpearl.ca
Mount Pearl, NL A1N 1G4	Website: www.mountpearl.ca

COMMERCIAL PERMIT APPLICATION

CONTACT INFORMATION (Please Print)

Property Owner:	Contractor:
Mailing Address:	Mailing Address:
Postal Code:	Postal Code:
Phone:	Phone:
Email:	Email:

NOTE: Application will not be processed unless form is <u>fully</u> completed, all information is received, and verification that Service NL has been contacted.

PROJECT DETAILS (Please Print)

Business Name:	Contact Name:

Civic Address:

Description of Work/Use:

Previous Tenant:	Start Date of Operation:

☐ Service NL Info Received	☐ Key Plan Attached	☐ Detailed Floor Plan

☐ To Construct	☐ To Extend	☐ To Demolish	☐ To Renovate	☐ To Occupy

Width:	Length:	Footprint Area:	Finished Floor Area:

Estimated Cost of Construction:	Start Date:	Completion Date:

DECLARATION: I hereby submit this application and confirm that the information supplied is correct and complete to the best of my knowledge. I agree to comply with all Municipal Regulations, the National Building Code, current edition, ancillary codes, agree to build in accordance with the plans approved by the City of Mount Pearl, and not to commence building without applicable written approval and permits from the City of Mount Pearl.

Please Note:
- The required Permit Fee (see City's Schedule of Rates and Fees) is to accompany the application form.
- Prior to formally submitting an application form, it is advisable that the applicant set up an appointment to review the application with the Planning Division to ensure that all required information has been supplied and to facilitate application processing.

NOTE: Where the Applicant and the Property Owner are <u>not</u> the same, the signature of the Property Owner is required <u>before</u> the application can be accepted for processing.

Applicant: _____

Date: _____

Property Owner: _____

Date: _____

... FOR STAFF USE ...

Date Fee(s) Received:

Received By:

Receipt #:

Assigned To:

DA #:

FOR APPROVAL (OFFICE USE ONLY)

Occupancy Permit Required ☐ Yes ☐ No	Drawings Supplied ☐ Yes ☐ No	Referred to Council ☐ Yes ☐ No
Building Permit $	Occupancy Permit $	Service Connection $
Landscaping Deposit $	Security Deposit $	Assessments $
TOTAL DUE $	APPROVED	DATE