

**Town of Bradford West Gwillimbury** 305 Barrie St, Unit 2 P.O. Box 419, Bradford, Ontario, L3Z 2A9

Telephone: 905-778-2055 Fax: 905-778-2070 www.townofbwg.com

## **Site Alteration Permit Application**

**Development Engineering** 

## All submissions are to be made electronically to engservices@townofbwg.com

<b>Proposed Work Details:</b>		
New Permit:	Place or Dump Fill:	
Permit Renewal:	Remove Topsoil:	
Expired Permit Renewal:	Alter the Grade of Land:	

Project Information	
Building Number, Street Name:	Lot/Conc.:
Municipality and Postal Code:	Plan Number/Other Description:
Description of Work:	Roll Number:

Applicant:	Owner:□	Authorized Agent of Owner:
Last Name:	First Name:	Corporation or Partnership:
Street Address:		Unit Number:
Municipality:	Prov. Postal Code:	E-mail Address:
Telephone Number:	Fax Number:	Cell Number:

Owner (if different from applicant):			
Last Name:	First Name:		Corporation or Partnership:
Street Address:			Unit Number:
Municipality:	Prov.	Postal Code:	E-mail Address:
Telephone Number:	Fax Number:		Cell Number:

Engineer:			
Last Name:	First Name:		Corporation or Partnership:
Street Address:			Unit Number:
Municipality:	Prov.	Postal Code:	E-mail Address:
Telephone Number:	Fax Number:		Cell Number:

## Applicant's Declaration

I,\_\_\_\_\_, declare that:

a) I am the Owner of the Site or have been authorized by the Owner to act on their behalf to make this application;

b) I have read By-law 2017-33 and agree to comply with it;

c) I understand that I am responsible to prevent erosion and sedimentation as a result of the works;

d) The information contained in the Application and supporting documents is complete and accurate;

e) The proposed Site Alteration will be conducted in accordance with the accepted plans;

f) If this is an application for renewal, to date the Site Alteration has been conducted in accordance with the accepted plans, and has complied with all conditions associated with the original permit;

g) Consent is given to the Town of Bradford West Gwillimbury, the Town Engineer, its employees and authorized representatives to access the property for the purposes of obtaining information and monitoring of the works;

h) Permits granted by the Town of Bradford West Gwillimbury are transferable only to a new land owner in accordance with the by-law;

i) Approvals may be required from other agencies prior to undertaking the work proposed. Permission, if granted for the proposed work, does not exempt the Owner/Applicant from complying with any or all other approvals, laws, statutes, ordinances, directives, regulations, etc. that may affect the property or the use of same;

j) A copy of the permit, conditions and accepted plans must be available on-site at all times.

All personal information on this form is collected pursuant to the Municipal Freedom of Information and Protection of Privacy Act and Municipal Act, 2001 and will be used for the purposes of administering and enforcing the requirements of the Site Alteration By-law. Questions regarding this collection may be directed to the Manager of Development, Engineering Services, 305 Barrie Street, Unit 2, Bradford, Ontario, 905-778-2055.

Signature (Owner/Applicant)

## **Owners Authorization**

If an Agent is used, the Owner must complete this section. If there is more than one Owner, a separate authorization from each individual or corporation is required. Attach an additional page(s) in the same format as this authorization if necessary.

I, \_\_\_\_\_being the registered owner of the subject lands, hereby

authorize (print name of agent) \_\_\_\_\_\_\_\_\_ to submit the above application to the Town of Bradford West Gwillimbury and appear on my behalf at any hearing(s) of the application and to provide any information or material required by the Town relevant to the application. I also agree to allow the Town of Bradford West Gwillimbury, its employees and agents to enter upon the subject property for the purposes of conducting a survey, inspection and tests that may be necessary to this application.

Signature:	Date:
Printed Name of Signatory:	Title:

OFFICE USE ONLY:			
Assigned File #:		Submission Date:	
<b>Application Fee:</b>			
Cash	Amount:		
Cheque	Cheque #:		
Visa/MC	Receipt#:		