



DEMOLITION PERMIT APPLICATION

DEMOLITION PERMIT APPLICATION	
CIVIC ADDRESS OF BUILDING:	
PROPERTY OWNER:	
APPLICANT NAME:	
MAILING ADDRESS:	
EMAIL:	PHONE:
BUILDING INFORMATION	
AGE OF STRUCTURE:	IS THE STRUCTURE LOCATED IN A HERITAGE DISTRICT? (SEE ATTACHED MAP)
REASON FOR DEMOLITION?	
HOW WILL MATERIALS BE DISPOSED OF?	
APPLICANT SIGNATURE OF AGREEMENT	
I HEREBY SUBMIT AND CONFIRM THAT THE INFORMATION SUPPLIED IS CORRECT. I AGREE TO COMPLY WITH ALL TOWN REGULATIONS AND BY-LAWS. THE TOWN OF BONAVISTA IS ABSOLVED FROM ANY FALSE OR MISLEADING INFORMATION THAT WAS GIVEN TO OBTAIN PERMIT.	
IN ADDITION, I ACKNOWLEDGE THAT I HAVE REVIEWED THIS APPLICATION AND AGREE TO PROVIDE ANY ADDITIONAL INFORMATION REQUESTED.	
APPLICANT NAME:	
APPLICANTS SIGNATURE:	DATE:

OFFICE USE ONLY		
CHIEF ADMINISTRATIVE OFFICER		DATE
DIRECTOR OF PUBLIC WORKS	WATER & SEWER	ECONOMIC, CULTURE & HERITAGE OFFICER
<input type="checkbox"/> APPROVED CONDITIONS OF APPROVAL		
<input type="checkbox"/> DECLINED REASONS FOR APPLICATION DECLINE / CHANGES REQUIRED		



DEMOLITION PERMIT APPLICATION

Municipal Heritage Districts (MU-H) are highlighted below

