

Town Hall
51 Toronto Street South
P.O. Box 190
Uxbridge, ON L9P 1T1

Telephone (905) 852-9181 Facsimile (905) 852-9674 Web www.town.uxbridge.on.ca

Application for a Pool Enclosure Township of Uxbridge

For use by Principal Authority									
Application number:				Permit number (if different):					
Date received:				Roll number:					
A. Project information									
Building number, street name				Unit number Lot/con.					
Municipality Posta			code F			Plan no./other description			
Type of pool					Area of pool (m ²)				
. Applicant Applicant is: □ Owner					or □ Authorized agent of owner				
Last name	Firs					rporation or partnership			
Street address					Unit number Lot/o			Lot/con.	
Municipality	Postal code			Pr	Province Ce		ell Number		
Telephone number E-mail									
C. Owner (if different from applicant)									
Last name	Firs	First name Corporation or partnership						ership	
Street address				Unit numbe			mber	Lot/con.	
Municipality	ality Postal co		Э	Prov		ovince	C	ell number	
Telephone number E-mail									
D. Contractor (optional)									
Last name		t name		Corporation or partnership					
Street address					Unit number Lot/con.		Lot/con.		
Municipality	Pos	tal code		Province E		E-ma	il		

E.	Enclosure Description and Details
	-
_	
<u> </u>	Declaration of applicant
ı	certify that:
	(print name)
1.	The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.
2.	The proposed work must comply with the provisions of the Township of Uxbridge By-law 2012-119, as amended, and that neither the issuance of a permit nor the carrying out of inspections by the Township shall relieve the owner/applicant from full responsibility for compliance with all of the regulations and statutes.
3.	Owners shall not alter the natural grading and drainage swales of their property. The responsibility is solely that of the property owner to assess. No site alteration shall take place within 60 centimetres of any property line.
	Date Signature of applicant

Township of Uxbridge documents are available in alternate formats upon request. Please fill out the Accessibility Request for Alternate Formats Form at www.town.uxbridge.on.ca or contact the Accessibility Coordinator at 905-852-9181 ext. 209 or at accessibility@town.uxbridge.on.ca.

NOTE: Personal information on this form is being collected under the authority of the Freedom of Information and Protection of Privacy Act R.S.O. 1990, c.F.31, s.39 (2) for the purposes of improving customer service. Questions about collection of personal information may be directed by mail to the attention of the Clerk, Township of Uxbridge, 51 Toronto Street South, Uxbridge, L9P 1T1.