

## **COMPLEMENTARY USE**

WITHIN A SINGLE FAMILY RESIDENCE WITHIN THE URBAN PERIMETER

1. PROPERTY INFORMAT	ION				
Surname of property owner		Given n	Given name of property owner		
Address (number, street)					
City		Province		Postal code	
Home phone	Cellphone/Office		E-mail	<u> </u>	
2. MANDATARY INFORMA	TION (IF APPLICABLE	E)			
Surname		Given n	ame		
Company					
Address (number, street)					
City		Province	OK	Postal code	
Office telephone	Office fax		E-mail		
	1				
3. ADDRESS OF WORK (IF	DIFFERENT)				
Address		l	ot number		
4. DESCRIPTION OF PRO	JECT				
Type of complimentary use add			☐ Business agents (insurance	broker, real estate agent);	
☐ Small household appliand			☐ Artisanal crafts		
□ Professional service (lawyer, notary, dentist, etc.)		matrono	<ul><li>Caterers, bakeries and past</li><li>Day care (9 children maximum</li></ul>		
<ul> <li>Personal services on site (hairdresser, barber, seamstress, tailor)</li> <li>Accommodation</li> </ul>		nstress,	Number of children:		
Number of rooms:  Other:					
Description of use (Attach any add	litional information if necessary).				
Description of modification wor	k to the residence to be co	ompleted (if	necessary):		

5. FINISHING	
Siding: Roofing: Foundation:	
6. CONTRACTOR	
☐ I WILL BE DOING THE WORK MY	F   (if not, please fill out the information below)
	First name:
Company:	Function:
Address:	City:
Province:	Postal code:
Tel.:	Fax:
RBQ #:	NEQ #:
7. COST ESTIMATION:	\$
8. SIGNATURE	
Signature :	Date :

## **DOCUMENTS TO BE PROVIDED**

	Plans Should there be any modification to the structure of the residence, please provide plans of the work to be completed.
The fo	llowing documents may also be necessary:
	Procuration  Form to be filled out and submitted should the request be made by a mandatary or authorized person.

**NB Unofficial translation.** The French version remains the official text and prevails in the case of a discrepancy.