



1. PROPERTY INFORMATION

Surname of property owner		Given name of property owner	
Address (number, street)			
City		Province	Postal code
Home phone	Cellphone/Office		E-mail

2. MANDATORY INFORMATION (IF APPLICABLE)

Surname		Given name	
Company			
Address (number, street)			
City		Province	Postal code
Office telephone	Office fax		E-mail

3. ADDRESS OF WORK (IF DIFFERENT)

Address	Lot number
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4. BUILDING CLASSIFICATION

<input type="checkbox"/> Meeting/gathering establishment <input type="checkbox"/> Care and detention establishment <input type="checkbox"/> Housing establishment <input type="checkbox"/> Business establishment <input type="checkbox"/> Commercial establishment <input type="checkbox"/> Industrial establishment <input type="checkbox"/> Other: _____	<input type="checkbox"/> Apartments <input type="checkbox"/> For persons with reduced autonomy <input type="checkbox"/> Residence <input type="checkbox"/> Chalet (seasonal) <input type="checkbox"/> Accommodation (hotel, motel, etc.) <input type="checkbox"/> Other: _____	<input type="checkbox"/> Single family <input type="checkbox"/> Bi generational <input type="checkbox"/> Duplex or triplex <input type="checkbox"/> Multifamily <input type="checkbox"/> Semi detached <input type="checkbox"/> Row/Town houses <input type="checkbox"/> Mobile home <input type="checkbox"/> Other: _____
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5. DESCRIPTION OF PROJECT

Projected start date (dd-mm-yyyy): _____
Projected end date (dd-mm-yyyy): _____
Description : <i>(Attach any additional information if necessary)</i>

6. METHOD

Demolition method:

Debris/construction waste management method:

7. CONTRACTOR

I WILL BE DOING THE WORK MYSELF (if not, please fill out the information below)

Surname:	_____	First name:	_____
Company:	_____	Function:	_____
Address:	_____	City:	_____
Province:	_____	Postal code:	_____
Tel.:	_____	Fax:	_____
RBQ #:	_____	NEQ #:	_____

8. COST ESTIMATION

\$ _____

9. AUTHORIZATION – BILL 25 (PROTECTION OF PERSONAL INFORMATION)

Do you consent to the Municipality of the Township of Hemmingford disclosing personal information about you to the appraisers mandated by the MRC des Jardins-de-Napierville, strictly necessary for the completion of their property assessment mandate, in accordance with the Act respecting the protection of personal information and Law 25?

Please check your consent:

- Yes, I consent
- No, I do not consent

10. SIGNATURE

Signature : _____ Date : _____
(dd-mm-yyyy)

DOCUMENTS TO BE PROVIDED

- Plan
 - the location of the building to be demolished;
 - photographs of the building or part of the building;
 - a copy of the authorizations required for compliance with the law, if applicable;

The following documents may also be necessary:

- Procuration
 - Form to be filled out and submitted should the request be made by a mandatary or authorized person*

Please take note the information provided for the delivery of this permit can be used by evaluators.

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