



**VILLE DE GRACEFIELD**  
351, Route 105 C.P. 329  
Gracefield (Québec) J0X 1W0  
Téléphone : (819) 463-3458  
Télécopieur : (819) 463-4236  
[www.gracefield.ca](http://www.gracefield.ca)

## Information required for an application for a permit

Planning department  
[astamour@gracefield.ca](mailto:astamour@gracefield.ca)  
[urbanisme@gracefield.ca](mailto:urbanisme@gracefield.ca)

### Personal information

Roll N° : \_ \_ \_ \_ - \_ \_ \_ - \_ \_ \_ \_

Name : \_\_\_\_\_ Date : \_\_\_\_\_

Address : \_\_\_\_\_ Telephone : \_\_\_\_\_

*If you are not the owner of this property, you will need a Power of Attorney signed by the owner or owners.  
(You will find enclosed a copy of a power of attorney form)*

### Type of permit

Construction	___	Pool	___	Fence	___
Garage sale	___	Demolition	___	Repairs	___
Septic installation	___	Other	___	Dock	___

Description of work to be done: \_\_\_\_\_

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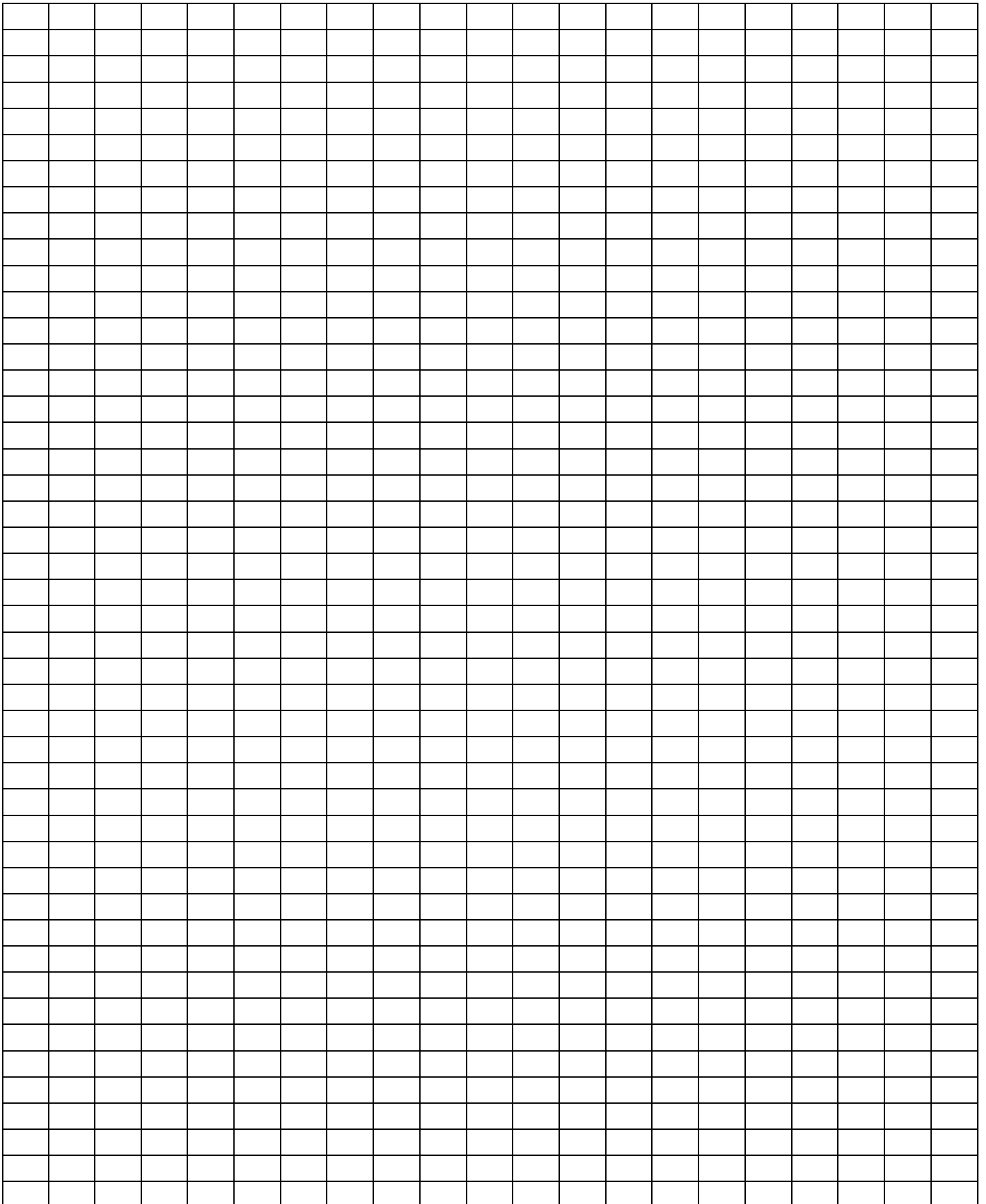
### Other information :

Dimensions of the construction: _____	Frontage of building: _____
Left side of building: _____	Right side of building: _____
Dimensions of the back of the building: _____	Height of building: _____
Height of ground floor: _____	Height of other floors: _____
Number of stories: _____	Contractor: _____
Distance from property line: _____	Distance from the street: _____
Right side clearance: _____	Left side clearance: _____
Cost of work: _____	Beginning of work date: _____
End of work date: _____	Distance from a waterway: _____

- If this is a construction, please indicate the interior and exterior finish, the roof and the pitch of the roof
- If this is for a shed or a garage, please indicate if there are any other secondary buildings on this site and their dimensions

Signature : \_\_\_\_\_

**Sketch :**



**Signature :** \_\_\_\_\_