



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

Information required for an application for a permit

Planning department

astamour@gracefield.ca

jtherien@gracefield.ca

prepose.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: _____

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: _____

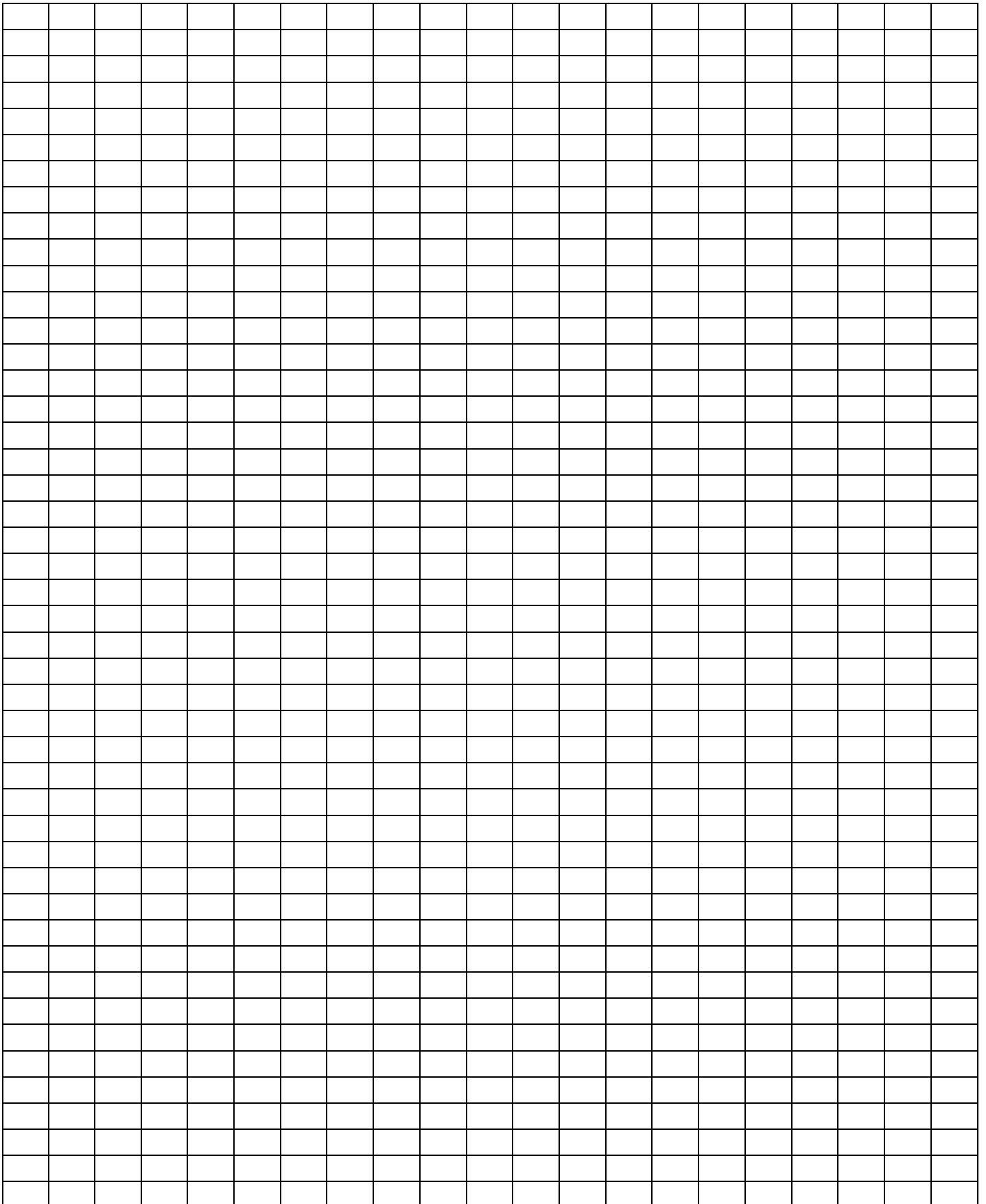
Cost of work: _____ Beginning of work date: _____

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 : _____