



Township of McKellar

BUILDING/ZONING DEPARTMENT

REQUEST FOR BUILDING/ZONING COMPLIANCE LETTER

APPLICANT INFORMATION

Name: _____

Address: _____ Unit # _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ / _____ Fax: _____

Email: _____

SUBJECT PROPERTY ADDRESS INFORMATION

Same as applicant Address:

Address: _____ Unit # _____

Legal Description (if available): _____

City: _____ Postal Code: _____

Re: _____

ENCLOSED SURVEY (MUST BE READABLE-SETBACKS, SIGNATURES AND DATES)

YES NO

PREFERRED METHOD OF REPLY (CHECK ALL THAT APPLY)

Fax Email including PDF of Document Regular Mail

AUTHORIZATION

Signature: _____ Date: _____

OFFICE USE ONLY:

Received by: _____ Date: _____

Payment Type: Debit Cash Cheque