

DEMOLITION PERMIT APPLICATION

4187 Hwy #317 (Box 100), Lac du Bonnet, MB, R0E 1A0

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Lac du Bonnet Planning District

CONTACT INFORMATION

OWNER:

APPLICANT:

MAILING ADDRESS:

MAILING ADDRESS:

CITY / PROVINCE:

CITY / PROVINCE:

POSTAL CODE:

POSTAL CODE:

PHONE NO.:

PHONE NO.:

EMAIL:

EMAIL:

PROPERTY INFORMATION

RM OF LAC DU BONNET

☐

TOWN OF LAC DU BONNET

☐

ROLL NO. :

CIVIC ADDRESS:

DESCRIPTION OF WORK(S):

COMMERCIAL

☐

RESIDENTIAL

☐

REQUIRED INFORMATION

Site Plan

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Square footage of Structure being Demolished _____

DECLARATION

The undersigned hereby applies for a permit in accordance with this application, all municipal by-laws and provincial regulations applicable thereto.

Applicant Name:

Applicant Signature:

Date:

Due to the high volume of applications, failure to provide all requested documentation with the application will result in the applicant being required to re-submit the updated and completed application package.