

# Building Demolition Application

*Town of Lumsden*



THE TOWN OF  
L U M S D E N

## Applicant Information:

|                                |             |                               |                 |  |
|--------------------------------|-------------|-------------------------------|-----------------|--|
| Applicant Name:                |             | Company Name (if applicable): |                 |  |
| Home Phone:                    | Cell Phone: | Fax Number:                   | E-mail address: |  |
| Address (PO Box, Rural Route): | City/Town:  | Province/Territory:           | Postal Code:    |  |

## Property Owner Information:

|                                |             |                     |                 |  |
|--------------------------------|-------------|---------------------|-----------------|--|
| Property Owner Name:           |             | Contact Person:     |                 |  |
| Home Phone:                    | Cell Phone: | Fax Number:         | E-mail address: |  |
| Address (PO Box, Rural Route): | City/Town:  | Province/Territory: | Postal Code:    |  |

## Contractor Information:

|                                |             |                     |                 |  |
|--------------------------------|-------------|---------------------|-----------------|--|
| Contractor Company Name:       |             | Contact Person:     |                 |  |
| Home Phone:                    | Cell Phone: | Fax Number:         | E-mail address: |  |
| Address (PO Box, Rural Route): | City/Town:  | Province/Territory: | Postal Code:    |  |

## Project Information:

Civic Address: \_\_\_\_\_

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_ Extension: \_\_\_\_\_

Disposal of Building Material: \_\_\_\_\_

Start Date: \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_

I, \_\_\_\_\_ of \_\_\_\_\_ in the Province of  
*(please print)* *(City/Town)*

Saskatchewan, solemnly declare that all of the above statements within this application are true, and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of *The Canada Evidence Act*.

I further agree that \_\_\_\_\_, is appointed as the Agent in regards to this  
*(please print)*  
application and has the authority to answer questions or inquires shall be directed to him/her, and he/she shall be provided information by the Town of Lumsden in regards to this application only. The Agent has my authorization to make decisions in his/her best judgement in regards to this application.

The information on this form is being collected under the authority of section 28(a) of *The Freedom of Information and Protection of Privacy Act* and will be used solely for the purpose of rezoning application.

I further agree to indemnify and hold harmless the Town from and against any claims, demands, liabilities, costs or damages related to the development undertaken pursuant to this application.

\_\_\_\_\_  
*Applicant Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Property Owner Signature*

\_\_\_\_\_  
*Date*

**Office Use Only:**

Permit No.: \_\_\_\_\_

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