

DATE: \_\_\_\_\_ Construction Value: \_\_\_\_\_

Construction Address: \_\_\_\_\_

Legal Description: Lot: \_\_\_\_\_ Plan No.: \_\_\_\_\_

Property Zone: \_\_\_\_\_ Tel: \_\_\_\_\_

Registered Owner: \_\_\_\_\_

Office use only:

Contractor's Business Name: \_\_\_\_\_

Tel: \_\_\_\_\_

(Contractors must have a current Maple Ridge Business Licence)

Design Firm: \_\_\_\_\_

Tel: \_\_\_\_\_

Architect: \_\_\_\_\_

Tel: \_\_\_\_\_

Engineer: \_\_\_\_\_

Tel: \_\_\_\_\_

## Sub Type: Check One

Commercial: ☐ Industrial: ☐ Institutional: ☐ Apartment over Commercial: ☐

Other ☐ (Please Specify): \_\_\_\_\_

Work Type: Landlord Improvement ☐

Explain in detail what you are doing: \_\_\_\_\_

## All areas below must be answered at time of application:

Number of Stories: \_\_\_\_\_

# of Non Residential Units being Created: \_\_\_\_\_

Occupier/Tenant: \_\_\_\_\_

Area of 1<sup>st</sup> Floor: \_\_\_\_\_

Area of 2<sup>nd</sup> Floor: \_\_\_\_\_

Area of Mezzanine or Loft: \_\_\_\_\_

Total Floor Area: \_\_\_\_\_

Will Any Plumbing Work Be Done? Yes ☐ No ☐  
(If yes a plumbing schematic is required)

Will Any Electrical Work Be Done? Yes ☐ No ☐  
(If yes load calculations are required)

If yes, Over 200 amps ☐ Under 200 amps ☐

Existing Seating Capacity: \_\_\_\_\_

Proposed Seating Capacity: \_\_\_\_\_

Contacts Phone #: \_\_\_\_\_ Contacts email: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Permit No.: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Permit Fee: \$ \_\_\_\_\_