



Municipality of Digby
 P.O. Box 429
 Digby, NS B0V 1A0
 Phone (902) 245-4777
 Fax (902) 245-5748
 building.department@municipality.digby.ns.ca



Building Permit Application

APPLICANT Name _____ Address _____ Phone # _____ Email _____	PROJECT LOCATION Community _____ Civic # _____ Street _____ Property ID (PID) _____
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PROPERTY OWNER(S) Name _____ Address _____ Phone # _____ Email _____	CONTRACTOR Name _____ Address _____ Phone # _____ Email _____
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TYPE OF PROJECT:
 New Alteration Addition Demolish Relocate Repair Change of Use Other _____

TYPE OF STRUCTURE:

Single Family House	Deck	Agricultural	Barn
Multi-Unit Residential	Shed	Commercial	Church
Cottage	Garage	Industrial	Community Center
Mobile Home	Manufactured Home	Institutional	Other _____

DETAILED DESCRIPTION OF PROJECT

Floors _____ Width _____ Length _____ Area _____
 Estimated Value of Work \$ _____

Office Use Only

Date Received _____ By: _____
 Municipality or Town _____
 File No. _____

Checklist

- Site Plan
- Building Plans
- On-Site Sewage Approval
- Transportation
- Engineer Letter
- Agent Authorized
- Applicants Signature

Fees

Building Permit _____
 Development Permit _____
 Other Fees _____
Total _____

Receipt # _____

Notes: _____

PLANS, APPROVALS & CERTIFICATIONS ATTACHED

Building Plans	Engineers Letters of undertaking
Specifications	Environment Approval
Detailed Site Plan	DOT Approval
Development Approval	Survey Plan

AUTHORIZATION OF AGENT
Complete this if the application is being made by someone other than the property owner(s).

I/we the property owner(s), authorize _____ to
 act as my/our agent with regard to this application, (Name of agent)
 to sign and file related forms or information, and to receive correspondence,
 including any related personal information.

Signature of Owner _____ Date _____

IMPORTANT: READ DECLARATION BELOW, THEN SIGN

I declare the information and statements contained in the application are true and the plans and specifications submitted are for the project described. It is clearly understood by the undersigned that this is only an application and does not authorize the applicant to proceed with any work until a permit is issued.

Signature of Applicant _____ Date _____

SEND COMPLETED APPLICATION TO THE MUNICIPALITY OF DIGBY BUILDING DEPARTMENT EITHER BY EMAIL, FAX OR MAIL