

Accessory Buildings / Accessory Uses

Development Location:		Applicatio	n No			
Shed / Accessory Building	Fence	Swimming Pool/Hot tub	Repair/Renovation			
Minor Landscaping	Deck/Patio	Driveway/Culvert	Retaining Wall			
Other 🔲						
Applicant Owner]				
Name:		Email:				
Company:	Daytime Phone: Cell Phone:					
Mailing Address: Postal Code:						
Note: If the applicant is not the registered land owner, written consent of the owner is required. See reverse.						
Est. value of work: \$ Building Dimensions: (L) (m/ft) x (W) (m/ft) x Height (m/ft) Describe (Additional Information)						

<u>Accessory buildings</u> - Applicant must submit a neatly scaled drawing, preferably on a Surveyors Real Property Report, that indicates the proposed *accessory building* relative to the boundaries, existing dwelling, and any other buildings. The building must be clearly dimensioned. Hand-drawn scaled drawings may be accepted if all required detail is shown. Construction details must be supplied as per the sketch on page two (reverse).

Applicant must identify if any fill material must be imported or removed.

The applicant must sign the approved plan indicating that he/she understands where the building must be located. A copy of the approved plan will then be kept for future reference.

Where fill material must be removed or brought to the property to prepare the site for construction, Town staff will carry out an inspection to determine if the grading may affect adjacent properties. If grading may be an issue, the Town reserves the right to require a grading plan.

I/We, ______, the applicant(s) named herein, do solemnly declare the statements herein contained in this application are true and made with a full knowledge of the circumstances connected with the same, and that the location and plot plan submitted correctly sets out the location of the development described in the said application. I/we make this solemn declaration, conscientiously believing it to be true and with the full knowledge of the property owner, and knowing that it is of the same force and effect as if made under oath.
Signature: ______ Date: ______

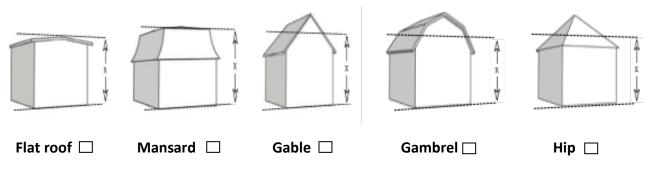
No processing fee required at the time of application. Fees will be collected at time of permit issuance. The Town of Paradise does not accept credit cards payments. We accept cheque, cash or debit only.

Office Use Only: Zoning ______ (i.e. RMD, RLD) DA required: Yes / No Scanned to File/Townsuite: Yes / No

Discretionary Use req'd: Yes / No Variance req'd: Yes / No Variance % ____ Staff initial: _____



Indicate Building type :



BUILDING HEIGHT (X) means the vertical distance, measured in metres, from established grade to the:

a. highest point of the roof surface of a flat roof.

b. deck line of a mansard roof; and

c. mean height level between the eave and ridge of a gable, hip or gambrel roof and in any case, a Building Height shall not include mechanical structures, smokestacks, steeples, and purely ornamental structures above a roof.

Accessory building information

Registered Owner	Contractor			
Name:	Email:			
Company:	Daytime	Phone:	Cell Phone:	
Mailing Address:			Postal Code:	
I, am the registered owner of the property in this application,				
and hereby give my consent to the application being made on my behalf.				

Payment for the Permit is required to be remitted within 60 days of the date the applicant is notified that the permit is ready. Failure to remit the payment as specified will result in cancellation of the permit application.

Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to process your application. Questions about the collection and use of the information may be directed to planning@paradise.ca.