

Inspector: M \_\_\_\_\_  
Applicant: Name \_\_\_\_\_ Address \_\_\_\_\_  
Receipt No. \_\_\_\_\_ Date Permit Issued 1 / 1 / 11

**OWNER**

Name \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
\_\_\_\_\_

**BUILDER**

Name \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
\_\_\_\_\_

**PROPERTY ON WHICH BUILDING IS TO BE ERECTED/DEMOLISHED**

**SITE**

Street No. \_\_\_\_\_  
Street Name \_\_\_\_\_  
Town/District \_\_\_\_\_  
Riding \_\_\_\_\_

**LEGAL DESCRIPTION**

Valuation Roll No. 173  
Lot 2 D.P. 3056  
Section \_\_\_\_\_ Block \_\_\_\_\_  
Survey District \_\_\_\_\_

**DESCRIPTION OF PROPOSED WORK AND MAIN PURPOSE OF USE**

\_\_\_\_\_

**FLOOR AREA** Whole Sq. Metres

**DWELLING UNITS** Number Erected

|                     |              |       |       |
|---------------------|--------------|-------|-------|
| ESTIMATED VALUES \$ | Building     | _____ | _____ |
|                     | Plumbing     | _____ | _____ |
|                     | Drainage     | _____ | _____ |
|                     | G.S.T.       | _____ | _____ |
|                     | <b>TOTAL</b> | _____ | _____ |

**NATURE OF PERMIT (TICK BOX)**

NEW BUILDING  
- exclude domestic garages and domestic outbuildings

FOUNDATIONS ONLY

ALTERED, REPAIRED, EXTENDED, CONVERTED, RESITED  
- include installation of heating appliances

NEW CONSTRUCTION OTHER THAN BUILDINGS - include demolitions

DOMESTIC GARAGES AND DOMESTIC OUTBUILDINGS

Date Inspected \_\_\_\_\_

REMARKS (e.g. stage reached with work)  
Footings & siting ok.

(CONTINUED OVER)

Reinstatement work as shown above has been/is yet to be carried out.

| Charge | CODE | No. |
|--------|------|-----|
|        |      |     |
|        |      |     |

District Foreman \_\_\_\_\_ Date 1 / 1

If NO Damage please show 'NIL'

Received from: M \_\_\_\_\_

E **010332** of \_\_\_\_\_

**FOREMAN'S RETURN OF DAMAGE DONE TO STREET AT:**

\_\_\_\_\_  
(LOCATION OF WORK)

\_\_\_\_\_  
(DISTRICT) RECEIPT No. \_\_\_\_\_

**REINSTATEMENT CHARGES**

| Type                               | Sq. Metres | Rate | Amount   |
|------------------------------------|------------|------|----------|
|                                    |            |      |          |
|                                    |            |      |          |
| <b>TOTAL COST OF REINSTATEMENT</b> |            |      | \$ _____ |

TICK as action completed

Rates and extensions verified

Refund authorised

Invoice No. \_\_\_\_\_ prepared

Per \_\_\_\_\_ Date 1 / 1

|                            |
|----------------------------|
| Internal Audit             |
| CHECKED                    |
| Initials                   |
| _____<br>Date <u>1 / 1</u> |

RECEIVED: 11 Jan 2011 SCANNED: 11 Jan 2011 BOX: 13587 BATCH: 7836 DOC: WDCADVQU



Dear Mr Goulson,  
Re my phone conversation  
with you on Monday 9-10-89.

Please find attached  
a building permit application along  
with the plan & specs for the  
proposed shed.

I am no architect.  
so I trust that these specs etc.  
are to the Council's satisfaction.

I look forward to  
hearing from you hopefully before  
the 1-11-89

Thank you.

yours faithfully,

D.E. Walker

D.E. Walker

Mrs Fleming Process B P

I am prepared to allow this  
despite s 306 not being signed  
is a small shed