



Town of Kirkland
 17 200 Hymus Boulevard
 Kirkland (Quebec) H9J 3Y8
urbanisme@ville.kirkland.qc.ca
 Tel. : 514 694-4100

**REQUEST FOR CONSTRUCTION PERMIT
 OR CERTIFICATE OF AUTHORIZATION**

Date of request _____

SECTOR Residential Commercial Industrial Institutional Public

TYPE OF WORK

- | | | |
|--|---|---|
| <input type="checkbox"/> Extension | <input type="checkbox"/> Driveway | <input type="checkbox"/> Renovation / Modification / Repair |
| <input type="checkbox"/> Building and accessory structures (shed, gazebo, pergola, etc.) | <input type="checkbox"/> Excavation | <input type="checkbox"/> Spa (Hot tub) |
| <input type="checkbox"/> Fence | <input type="checkbox"/> Foundation | <input type="checkbox"/> Deck / Balcony |
| <input type="checkbox"/> New construction | <input type="checkbox"/> Ground level patio / Addition of non-vegetated surface | <input type="checkbox"/> Heat pump/ Air conditioner |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Pool | <input type="checkbox"/> Usage (certificate of occupancy) |
| <input type="checkbox"/> Sign / Signage | <input type="checkbox"/> In-ground | <input type="checkbox"/> Other: _____ |
| | <input type="checkbox"/> Above ground | |

WORK LOCATION	PROPERTY OWNER
Address : _____	Name : _____ Address : _____ Telephone : _____ Email : _____
APPLICANT*	CONTRACTOR
<input type="checkbox"/> <i>Same as owner</i>	<input type="checkbox"/> <i>Same as owner</i> <input type="checkbox"/> <i>Same as applicant</i>
Name : _____ Address : _____ Telephone : _____ Email : _____	Name : _____ Address : _____ Telephone : _____ Email : _____ # RBQ : _____ # NEQ : _____

DESCRIPTION AND SCHEDULE OF WORK

Scheduled date for work commencement: _____ Scheduled date for work completion: _____

Work cost estimate (before taxes) : \$ _____

IMPORTANT NOTICE

This application does not constitute an authorization to commence work. Such work may only start once the construction permit or certificate of authorization has been issued.

DECLARATION AND SIGNATURE OF APPLICANT*

I declare that the above information is accurate and I agree to comply with the Town of Kirkland's municipal By-Laws, as well as with any related regulations that may apply.

Name : _____ Signature : _____ Date : _____

** If you are not the owner, please attach a power of attorney from the property owner authorizing you to apply on his/her behalf.*