



LETTER OF AUTHORIZATION TO UNDERTAKE WORK

Building Division
5950 Maledn Road, 2nd Floor
LaSalle, Ontario N9H 1S4
TEL: 519-969-7770 ext. 1245

A. Project Information

Building number, street name		Unit number	Lot/con.
Municipality	Postal code		

B. Type of Permit

<input type="checkbox"/> New Construction	<input type="checkbox"/> Addition to an Existing Building	<input type="checkbox"/> Alteration/Repair
<input type="checkbox"/> Demolition	<input type="checkbox"/> Sign (Mobile)	<input type="checkbox"/> Sign (Other than Mobile)
<input type="checkbox"/> Conditional Permit	<input type="checkbox"/> Other:	

Description of proposed work:

C. Applicant

Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number	Fax	Cell number	

D. Property Owner

Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number	Fax	Cell number	

As the **PROPERTY OWNER**, I HEREBY consent to the work being completed as described above and for the Town of LaSalle to issue the required building permit(s).

Owner's Signature

Date