



SCHEDULE "A"

Permit No.: _____

DRIVEWAY PERMIT APPLICATION

Applicant: _____

Location: Lot No.: _____, Block No.: _____, Plan No.: _____

Civic Address: _____

Telephone No.: _____ Email: _____

Type of Driveway: ☐ Asphalt ☐ Stamped Asphalt ☐ Brick Paver ☐ Concrete
 ☐ Stamped Concrete / Exposed Aggregate

Width of the Driveway: _____ Driveway Flare: ☐ Yes ☐ No

Corner Lot: ☐ Yes ☐ No

Attached Drawings: ☐ Yes ☐ No

Date of Commencement: _____ Date of Completion: _____

Additional Comments: _____

I hereby agree to comply with the bylaw of the municipality respecting building and acknowledge that it is my responsibility to ensure compliance with the Driveway Bylaw of the municipality and all applicable Acts and Regulations regardless of any review of drawings or inspections that may or may not be carried out by an inspector.

Signature of Applicant

Date