

PO Box 1030 Unity, SK SOK 4L0 **306-228-2621** fax 306-228-4221 townofunity@sasktel.net

## Application for a Permit to MOVE or DEMOLISH a Building

Building address/ locati	on		
Lot	Block	Plan	
Dimensions: length	width	height	
<b>DEMO PERMIT</b> I hereby make application	on for a permit to demo	lish the building described abo	ve
Beginning on _	, 20	)	
Completed by	, 20	·	
MOVE PERMIT I hereby make application	on for a permit to move	the building described above,	to
Street Address		Town/City	
Building Mover:			
Proposed Date of Move	::	, 20	
	ved over the following ro	oute:	
The site work (filling, fir	nal grading, landscaping,	etc.) which will be done after	the removal of the building includes:
and pay for any damage deposit such sum as ma responsibility to ensure	e done to any property a ny be required by Section compliance with any otl	s a result of the demolition or 11.6.1 (d) of the said bylaw. I a	icipality and to become responsible moving of the said building, and to cknowledge that it is my d regulations, and to obtain all
Signature of Owner or	 Agent	Print Name	, 20 Date



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## **Demolition Deposit Reimbursement Form**

Date:
Name of Applicant:
Mailing Address:
Location of Property:
Legal Address:
Demolition of: $\square$ house $\square$ garage $\square$ shed $\square$ deck $\square$
Signature of Applicant
FOR OFFICE USE
Name of Inspector:
Date of Inspection:
Condition of Inspected property:
Signature of Inspector