

City of Burnaby
Building Department 4949 Canada Way, Burnaby, BC V5G 1M2
Telephone: 604-294-7130 Fax: 604-294-7499 www.burnaby.ca/building

Application Date:	Page 1 of 1
Plan Checker:	
Phone #: 604	

	APPLICATION	IN EOD TENA	NIT IMPROVE	JENT DEDME	/INIOLLIBIA	IC FACT TOA	ALVINIA)	
		IN FUR TENA	NT IMPROVE	MENT PERMIT	(INCLUDIA	NG FASI IRA	CKING)	
Building Address:				100		Postal Co	ode:	
Legal Description: Legal Description:	ot:	Block:		D.L.		Plan:		
Tenant Name:						Unit #:		
Occupancy Type:	Retail Personal Service	Office Manufacturing	Restaurant Repairs	Food Sal		hool Other:—		
Building Owner (s):	_1 craonal oct vice	Iviariulacturing	Trepairs		aiwa	Phone:		
				Postal Code:		E-mail:		
Address: Postal Code: Designer: Fax:				Phone:				
Designer: Address:				Postal Code:	E-mail;			
Contractor:				Fax:				
				IMBL #:		Phone:		
Address:		Fov				E-mail:		
Contact:	بالمسمئلة ما با	Fax:		Phone: Construction \	/alua: ¢	E-mail:		
No. of sets of plans s	ubmitted:			Construction	alue. \$			
Adjacent Tenants Location Suite #	Ten	ant Name			Type of Bus	eineee		
Side Side	Terra	in Name			Туре от Ба	311033		
Side								
Rear								
Above Below								
Building Information	n No.	of Storeys: F	Fire Alarm:	Sprinklers	: Ex	cit Signs:	Emergency Lighting:	
this project. The name of	the applicant, the r	ame and address of	the business associ	iated with the applic about the collection	ation, the address	ss to which the perm is information, please	used to contact the parties involved in hit pertains, and the value of the wor e contact the Building Department a	
FOR STAFF USE ONLY	The second second second		Service Control			AND DESCRIPTION OF STREET		
Submission Requ	rements for						O LLI TI O LLI NIA	
Architectural Drawings Structural Drawings (inc Electrical Drawings (load Plumbing Drawings Mechanical Drawings (k Schedule A Schedules B	d calc)		ne Sub'd N/A		Consent to I Schedule E Alternative S HPO New H	1 (Residential Only)		
P.P.A. Required: Yes	☐ No	P.P.A. App	proval #:		P.P.A. Aprro	val Date:		
Engineering Env. Services F.P.O. Comments	Date For	ward	Returned	Health Electric Plumb		Date Forwar	rd Returned	



Office Use Only			
Building Permit #:			

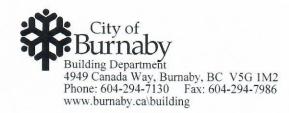
AGENT AUTHORIZATION - BUILDING DEPARTMENT

Demolition and Building Permits

OWNER/LESSEE

This will confirm my appointment of:	
	(Agent's Name and/or Name of Company)
as my agent in all matters related to obtaining any required building	permits or demolition permits for:
Project Address:	
and to make all necessary arrangements with the City of Burnaby, thereto.	to perform all matters and to take all necessary proceedings with respect
	on behalf, the City will deal exclusively with my agent with respect to all ng permit and are under no obligation to communicate with me or any authorization supersedes all previous appointments.
	ke work on the property. Control of activities on the property remains with the property owner independently to begin and continue any demolition or
I /We hereby certify that I am/we are the () registered owner(s), or () the lessee of the said land and do hereby consent to the above.
1) Owner's or Lessee's Name	Signature
2) Owner's or Lessee's Name	Signature
3) Owner's or Lessee's Name	Signature
Company Name (if applicable)	Date
A	GENT
Acknowledged by Agent:	
(Agent	's Name and/or Name of Company)
Agent's Signature:	
Phone: Email:	Date:
Address:	

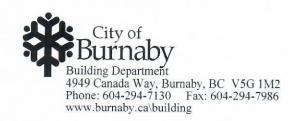
All building permits are issued in the owner's name and only the owner, not the agent, can request for transfer, refund or cancel a permit.



CONSENT TO CONSTRUCTION

ACKNOWLEDGEMENT OF LESSEE /STRATA OWNER'S AUTHORITY TO BUILD

This will confirm that:		Bu	illding Permit #
This will confirm that:			(for office use only)
Lessee (Tenant) or S	trata Owner's Name:		
Property Address: _			
Legal Description: _			
will be making an ap described above. T authority to build on t	The undersigned acknow	rmit to construct certa vledges that the les	ain improvements at the property see (tenant) / strata owner has
	nat I/We am/are the()r and(s) and do hereby cor		() Strata Council, or () Property
Print Name		- Signatur	е
Print Name		Signatur	e
Print Name		Signatur	е
Print Company Name, where	applicable		
Address:		City:	Postal Code:
Telephone:	E-mail:		Date:



CONSENT TO CONSTRUCTION

ACKNOWLEDGEMENT OF LESSEE /STRATA OWNER'S AUTHORITY TO BUILD

This will confirm tha	+ .	Building Permit #			
This will commit tha	ι.		(for office use only)		
Lessee (Tenant) or	Strata Owner's Name:				
Property Address:					
Legal Description: _					
will be making an a described above. authority to build on	The undersigned acknowle	nit to construct o	ertain improvements at the property lessee (tenant) / strata owner has		
I/We hereby certify Manager of the said	that I/We am/are the () re land(s) and do hereby cons	gistered owner(sent to the above	s), () Strata Council, or () Property		
Print Name		Sign	nature		
Print Name		Sign	pature		
Print Name		Sigr	ature		
Print Company Name, whe	re applicable				
Address:		City:	Postal Code:		
Telephone:	E-mail:		Date:		