

Internal Use Only	SECTION 1
-------------------	------------------

Application Number _____ Property Class _____ Structural Type _____

Application Set Up Information

Project Information	SECTION 2
---------------------	------------------

Civic Address _____ Lot # _____

Business Name _____ Project Value Estimate (\$) _____
(if applicable)

Purpose of Application	SECTION 3
------------------------	------------------

New Construction	Extension/Addition	Renovation/Alteration
Demolition	Change of Occupancy	Repair

Application Type	SECTION 4
------------------	------------------

Dwelling	Apartment/Secondary Suite	Commercial Building
Patio/Deck	Fence	Accessory Building
Pool/Hot Tub	Site Work/Driveway	Sign
Wood Stove/Fireplace	Home Office	Other (describe below)

Detailed Description of Proposed work:

PERS – Application for Building Permit	Planning, Engineering & Regulatory Services
Owner Contact Information	SECTION 5
<p>Name _____</p> <p>Address _____ Postal Code _____</p> <p>Phone: (Home) _____ (Work) _____ (Cell) _____</p> <p>Email Address _____</p> <p style="text-align: center;">Note: Name of property owner must match that listed on the City of St. John’s Assessment Roll</p>	
Applicant Contact Information (if different from owner)	SECTION 6
<p>Name _____</p> <p>Address _____ Postal Code _____</p> <p>Phone: (Home) _____ (Work) _____ (Cell) _____</p> <p>Email Address _____</p>	
Contractor/Consultant Contact Information (Optional)	SECTION 7
<p>Name _____</p> <p>Address _____ Postal Code _____</p> <p>Phone: (Home) _____ (Work) _____ (Cell) _____</p> <p>Email Address _____</p>	

Applicant Signature of Agreement

SECTION 8

I hereby submit this application and confirm that the information supplied is, to the best of my knowledge, correct. I agree to comply with all City Regulations & By-Laws, agree to develop in accordance with the plans approved by the City of St. John's and not to commence development without applicable written approval and permits from the City of St. John's. In addition, I acknowledge that I have reviewed this application and agree to provide any additional information requested and to pay all applicable fees as noted on the City's fee schedule (www.stjohns.ca). To view these fees, please click on the link below that pertains to your application:

[Inspection Services Fees and Rates](#)

Note: Where the applicant and property owner are not the same, the signature of the property owner is required before the application can be accepted for processing.

Applicant Signature _____ Date (yyyy-mm-dd) _____

Property Owner Signature _____ Date (yyyy-mm-dd) _____

Staff Signature _____ Date (yyyy-mm-dd) _____

Privacy Statement

SECTION 9

Collection of Personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to process your Permit to Construct or Demolish Application. Questions about the collection and use of the information may be directed to the Manager of the Regulatory Services Division, by email: building@stjohns.ca or by phone 709-576-8565.

Please submit completed form to:

Inspection Services
3rd Floor Annex
10 New Gower Street
P.O. Box 908
St. John's, NL A1C 5M2

Email: permits@stjohns.ca
Fax: 709-576-8160
Call: 709-576-8565