The Corporation of the City of Fernie

Demolition Application

Date:, 20		
OWNER:	Mailing Address	Phone No.
	Maning / Koress	Thome ivo.
CONTRACTOR: Name:	Mailing Address	Phone No.
Ivame.	Maining Address	Flione No.
	uthorized Agent as verified on the Owners or a permit for the purpose of demolishing	
Civic Address:		
Roll # Lot	t (s): Block Plan:	D.L
Are you aware of any Asbestos of demolition Yes / No	as a heritage site? Yes / No r Urea-formaldehyde materials that will be	
Name of firm doing removal		Phone No
utility providers must confirm be B.C. Hydro and Power Authori	Applicant's Signature: L, INSTITUTIONAL, AND INDUSTRI low that their respective services are disco ity Title	AL buildings the following nnected and/or rendered safe:
Signature	Titte	Date
Terasen Gas		
Signature	Title	Date
Telus Telephone Company		
Signature	Title	Date
Public Works Department		
Signature	Title	Date
-	emical or toxic substances and their tanks a Authorized Official must sign this approva	
Signature	Title	Date
Please return when the agencies 1	isted above have endorsed.	

Applicant's Signature: _____

Conditions** Work is to be completed within 60 days and the owner is responsible for any damage incurred to Municipal Works and Rights-of-Way. The permit holder shall maintain a protected work site from the public. Further the permit holder will pay transfer station fees on the basis of the amount of material deposited at any regional transfer station site.