

For use by Principal Authority			
Date Received:		File Number:	
		BA/	
A. Applicant Information			
Applicant is: Owner or Authorized Agent of Owner			
Last Name		First Name	Corporation or partnership
Street Address		City/Town	Province
Postal Code	Phone Number		Email
B. Property Owner Information (if different from Applicant)			
Last Name		First Name	Corporation or partnership
Street Address		City/Town	Province
Postal Code	Phone Number		Email
C. Proposed Demolition Site			
Street Address		City/Town	Province
			Postal Code
Legal Description			
D. Declaration of Owner			
<p>I, _____ confirm that all of the utilities below will be disconnected and any existing private wells or sewage systems will be decommissioned prior to or during demolition:</p> <p style="text-align: center; margin-left: 40px;">Print Name</p>			
<p>1. Gas will be disconnected</p> <p style="margin-left: 40px;">YES NO N/A</p>			
<p>2. Hydro will be disconnected</p> <p style="margin-left: 40px;">YES NO N/A</p>			
<p>3. Water will be disconnected</p> <p style="margin-left: 40px;">YES NO N/A</p>			
<p>4. Sanitary Sewer will be disconnected</p> <p style="margin-left: 40px;">YES NO N/A</p>			
<p>5. Storm Sewer will be disconnected</p> <p style="margin-left: 40px;">YES NO N/A</p>			
Continue to the next page			



Demolition Property Status Form

6. Private Well will be disconnected/ decommissioned
YES NO N/A
7. Sewage System will be disconnected/ decommissioned
YES NO N/A
8. All fuel tanks to be removed in accordance with TSSA
YES NO N/A

Signature of Owner: _____ Date: _____

Signature of Applicant: _____ Date: _____
(if different from owner)