



TOWNSHIP OF ADJALA-TOSORONTIO

7855 Sideroad 30
Alliston, ON L9R 1V1
705-434-5055 FAX: 705-434-5051
www.adjtos.on.ca

PERMIT EXTENSION APPLICATION

*For use when; 1. Construction not commenced within 6 months of permit issuance, or, 2. Construction discontinued for over one year after construction commenced

Property Owner's Name: Phone: (Day)
911 Property Address: Phone: (Evening)
Lot: Conc: Part Lot: Fax:
Type of Construction: Building Permit #:

Reason construction not commenced or discontinued:

Have updated plans been submitted: Yes No
Who designed the updates:
Designer form attached: Yes No

All the statements and representations contained in the attached documents filed in support of this application shall be deemed part of this application for all purposes.
I, the undersigned, am the authorized owner/agent of owner named in the application and I certify the truth of all the statements or representations contained therein.
Location, Ontario Date
Signature of Owner or Authorized Agent

OFFICE USE ONLY
Extension Approved
Approved with conditions
Not Approved
More Information Required
Notes:
CHARGES:
Permit Extension \$
Other: \$
TOTAL: \$
RECEIPT #