



Regional Municipality of Durham Health Department

Application for Consent for Building Addition or Change of Use

- 101 Consumers Drive, 2nd Floor, Whitby 181 Perry Street, 2nd Floor, Port Perry
- Building Addition Change of Use

Applicant: Applicant is **Owner** or **Authorized Agent of Owner**

Last Name: _____ First Name: _____
Corporation or Partnership: _____
Street Address: _____
City/Province: _____ Postal Code: _____
Phone: _____ Email Address: _____

Owner:

Last Name: _____ First Name: _____
Corporation or Partnership: _____
Street Address: _____
City/Province: _____ Postal Code: _____
Phone: _____ Email Address: _____

Property Information:

Municipality (from Tax Bill): _____
Street Address: _____
City/Province: _____ Postal Code: _____
Roll Number (from Tax Bill): _____ Concession: _____ Lot: _____ Sublot: _____
Reg Plan: _____ Lot Size (M²): _____

Site Details: (attach Plot Plan or draw on Diagram page for a Building Addition)

Description of Proposed Construction and/or Change of Use:

Existing Building Information:

Residential Commercial Industrial Other _____

Size (M²): _____ Number of Bedrooms: _____

Number of Fixture Units:

Bathroom Group (Toilet, Sink and Tub/Shower): _____ Toilet: _____

Dishwasher: _____ Washbasin: _____ Clothes Washer: _____

Tub/Shower: _____ Laundry Tub: _____ Kitchen Sink: _____

Proposed Change(s) to Building / Property:

Residential Commercial Industrial Other _____

Accessory Dwelling Unit

Size (M²): _____ Number of Bedrooms: _____

Number of Fixture Units:

Bathroom Group (Toilet, Sink and Tub/Shower): _____ Toilet: _____

Dishwasher: _____ Washbasin: _____ Clothes Washer: _____

Tub/Shower: _____ Laundry Tub: _____ Kitchen Sink: _____

Existing Water Source and Sewage Disposal System Information:

Water Supply:

Municipal

Private (select type): Dug or Bored Well Drilled Well Other: _____

Existing Sewage Disposal System: File Number (if known): _____

Year Installed (if known): _____

Septic Tank and Leaching Bed Holding Tank Other: _____

Declaration:

I certify that the above information is complete and correct

Signature of Owner/Applicant: _____ Date: _____