



MUNICIPALITÉ DE LA PÊCHE

1, Route Principale Ouest

La Pêche (Québec)

J0X 2W0

Phone:(819) 456-2161

Fax:(819) 456-4534

Request started on:

Request Completed on:

Re

Entered by:

Permit Type:

Cert. autorisation - Déplacer bâtiment

Nature:

Identification

Owner

Name: _____

Address: _____

City: _____

Postal Code: _____

Phone: _____

Applicant

Name: _____

Address: _____

City: _____

Postal Code: _____

Phone: _____

Location

Roll No.: _____

Address: _____

Zone: _____

Distinct P. of Land:

Zoning Code: _____

Inspection Sector: _____

Service: _____

Cadastre: _____

Use Cooc

Projecte

Frontage

Depth:

Area:

Number

Year of

Number

Floor Ar

Number

Work

Performer of the works

Name: _____

Address: _____

City: _____

Postal Code: _____

Phone: _____

Responsible Person

Name: _____

Phone: _____

Work Starting Date: _____

Work Description

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Applicant's Signature

Applicant's Signature: _____ Date: _____
