

SCHEDULE "E"
DISTRICT OF FORT ST. JAMES
APPLICATION FOR A TEMPORARY INDUSTRIAL PERMIT

I/We hereby make application to the District of Fort St. James for a Temporary Industrial Permit.

1. Name of Applicant(s) _____

2. Address _____

3. Telephone Number: Business _____ Residence _____

4. Name of Owner(s) _____
(If different from Applicant)

5. Address _____

6. Legal Description of Property _____

7. Street Address of Property _____

8. Official Community Plan Map Designation _____

9. Present Zoning _____

10. Description for Temporary Industrial use applied for:

Estimated Date when Temporary Industrial Use Will Cease: _____

I/We Enclose \$100.00 being the Application Fee.

Proposed Water Supply _____

Proposed Sewage Disposal _____

Proposed Access _____

Solid/Liquid Waste Disposal _____

Attached is Letter of Consent from the Owner _____
(Applies only if the Applicant is not the Owner)

I/WE HEREBY DECLARE THAT ALL THE ABOVE STATEMENTS AND THE INFORMATION CONTAINED IN THE MATERIAL SUBMITTED IN SUPPORT OF THIS APPLICATION ARE TO THE BEST OF MY/OUR BELIEF, TRUE AND CORRECT IN ALL RESPECTS.

Dated this day of , 20 .

Signature of Applicant

Print Name

Note: Prior to the issuance of a Temporary Industrial Permit, the District of Fort St. James may require, as a condition of issuing the Permit, security to guarantee the performance of the Permit.