

Application is hereby made to:

The Corporation of the Township of **North Kawartha**

P.O. Box 550, 280 Burleigh Street Apsley, Ontario K0L 1A0 (705) 656-4551 or 1-800-755-6931

Fee: \$125.00

Fax: (705) 656-4446 s.matheson@northkawartha.on.ca

Entrance Permit Application (By-law 50/09)

	(temporary) Fee:	\$50.00		
0	Construct an			
0				
0	_ `			
•				
0	Construct a temporary entrance			
Regis	stered owner:			
Name	eAddress			
City_	Postal Code			
Phone	e Number			
Locat	tion of Property:			
Lot No. / Con Roll No				
Township County				
On The Side of (Road Name) NSEW				
About	t km from (nearest major intersection)			
Use c	of entrance:			
Access Required For				
Propo	osed material			
	ailed plan showing location of building, addition, road entrance etc. accompany each application.			
Approximate distance approaching traffic is visible from the point of entrance:				
It is understood that all works will be constructed, altered, maintained or operated at the expense of the undersigned, that the work must not begin before a permit has been issued by the Municipality of North Kawartha. The issue of a permit by the Municipality does not relieve the holder of the responsibility of complying with relevant By-Laws. In consideration of any permit issued in respect to this application, we, the applicants for ourselves, our heirs, executors, administrators, successors and assigns hereby agree to observe, keep and perform and be subject to the regulations and conditions of the said permit and to indemnify and save harmless the Municipality of North Kawartha from and against all loss, cost, damages, expenses, claims and demands whatsoever to which the Municipality may be put or which the Municipality may be liable by reason of anything done or omitted to be done in the construction,				
	ations, or special conditions noted below of the works authorized. The cipality may issue permits upon such terms conditions considered reas	onable,		

and may at its discretion cancel any such permits at any time.

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A fee in the amount of North Kawartha	of \$	is enclosed made payable to the Municipality	
Date		Phone #	
Name		Address	
City	Prov	Postal code	
Signature		Date	
	*** Do	o Not Write Below Line***	
Date Receipt #		eceived	
Culvert size/length_			
Special Remarks:			