



# Town of New-Wes-Valley

P.O. Box 64, Badger's Quay, NL A0G 1B0

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## ACCESSORY BUILDING (RESIDENTIAL) PERMIT APPLICATION

I, \_\_\_\_\_ of \_\_\_\_\_  
(Name of home owner) (Civic Address)

hereby make application to the Town of New-Wes-Valley for permission to construct/renovate as noted below:

<b>RESIDENTIAL</b> <input type="checkbox"/> Garage <input type="checkbox"/> Shed	<b>ZONING</b> <input type="checkbox"/> Mixed Development <input type="checkbox"/> Newtown Residential <input type="checkbox"/> Open Space <input type="checkbox"/> Residential <input type="checkbox"/> Seasonal Residential <input type="checkbox"/> Watershed <input type="checkbox"/> Rural
<b>ACCESSORY BUILDINGS</b> Lot Area: _____ m <sup>2</sup> (min. 330 m <sup>2</sup> ) Min. Side Yard: _____ m (min. 1.5m) Min. Rear Yard: _____ m (min. 8m) Coverage Area: _____ m <sup>2</sup> (max 7%) Building Height: _____ m (max 6m) Lot Road Frontage: _____ m (min. 30m)	
<b>CHECKLIST</b> <input type="checkbox"/> Survey of land <input type="checkbox"/> Blueprint/Sketch <input type="checkbox"/> Department of Transportation Approval <input type="checkbox"/> Paid \$25 fee <input type="checkbox"/> Obtain estimated cost of materials <input type="checkbox"/> Detail of lot structure coverage & location <input type="checkbox"/> Confirm with Charge-Hand no Town water lines present	

**If required, permission must be FIRST obtained from: Service NL – Residential (256-1420)**

I declare the information contained in this document and applicable attachments are true to the best of my knowledge and that all Provincial, Municipal & Zoning Regulations will be complied with.

Home owner Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Tel: \_\_\_\_\_  
mm dd yyyy

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Tel: \_\_\_\_\_  
mm dd yyyy

### For Office Use Only:

Council Approval: Motion #: \_\_\_\_\_

Clerk I Signature: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Approval Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm dd yyyy

<b>REQUIRED</b>	
<b>APPLICATION NUMBER:</b>	_____
<b>PERMIT NUMBER:</b>	_____
<b>REPORTED TO MAA:</b>	____/____/____ mm dd yyyy
<b>PERMIT REGISTRY UPDATED:</b>	<input type="checkbox"/>