



Application for a Permit to Install Backflow Prevention Devices

For use by Principal Authority			
Application number:	Permit number (if different):		
Date received:	Roll number:		
Application submitted to: The Town of Amherstburg			
A. Project information			
Building number, street name		Unit number	Lot/con.
Municipality	Postal code	Plan number/other description	
Project value est. \$			
B. Purpose of application			
Installation of _____ testable backflow prevention device(s).			
Current use of building			
Description of proposed work			
C. Applicant Applicant is: <input type="checkbox"/> Owner or <input type="checkbox"/> Authorized agent of owner			
Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number ()	Fax ()		Cell number ()
D. Owner (if different from applicant)			
Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number ()	Fax ()		Cell number ()

E. Certified Tester Information				
Last name		First name	Corporation or partnership (if applicable)	
Street address			Unit number	Lot/con.
Municipality		Postal code	Province	E-mail
Telephone number ()		Fax ()		OWWA Certification Number
I. Declaration of applicant				
<p>I _____ declare that:</p> <p style="text-align: center;">(print name)</p> <ol style="list-style-type: none"> The information contained in this application is true to the best of my knowledge. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership. <p>_____</p> <p style="display: flex; justify-content: space-between;"> Date Signature of applicant </p>				

Personal information contained in this form and schedules is collected under the authority of subsection 8(1.1) of the *Building Code Act, 1992*, and will be used in the administration and enforcement of the *Building Code Act, 1992*. Questions about the collection of personal information may be addressed to: a) the Chief Building Official of the municipality or upper-tier municipality to which this application is being made, or, b) the inspector having the powers and duties of a chief building official in relation to sewage systems or plumbing for an upper-tier municipality, board of health or conservation authority to whom this application is made, or, c) Director, Building and Development Branch, Ministry of Municipal Affairs and Housing 777 Bay St., 2nd Floor. Toronto, M5G 2E5 (416) 585-6666.