



Building Division
Planning and Development Department
2ND Floor, 4949 Canada Way, Burnaby, BC V5G 1M2
Phone: 604-294-7130 Email: Permits@Burnaby.ca

DEMOLITION PERMIT MULTI-FAMILY AND COMMERCIAL APPLICATION FORM

Application Date: _____

Customer Service Assistant (CSA) _____

Section 1: Property Information

SITE ADDRESS:		POSTAL CODE:	
LEGAL DESCRIPTION: Lot:	Block:	DL:	Plan:
Current Use of Building(s) to be Demolished:			
Building Type to be Demolished:	☐ Principal Building(s)	☐ Accessory Building(s)	☐ All Building(s) on Site
Number of Principal Buildings to be Demolished:		Gross Floor Area (GFA) of total building(s) to be demolished:	
Number of Accessory Buildings to be Demolished:			
Number of Dwelling Units being Demolished:		Is this a City Project: ☐ Yes ☐ No	

Section 2: Building Owner(s) *Note: if complete demolition is required, the mailing address must differ from the site address.*

PROPERTY OWNER:		
ADDRESS:	CITY:	POSTAL CODE:
PHONE NUMBER:	E-MAIL:	

Section 3: Demolition Contractor *Business License Name*

DEMOLITION CONTRACTOR:	Business License (IMBL or Burnaby):
ADDRESS:	CITY: POSTAL CODE:
PHONE NUMBER:	E-MAIL:

Section 4: Agent Contact *Agent Authorization Form Required*

AGENT CONTACT:	
ADDRESS:	CITY: POSTAL CODE:
PHONE NUMBER:	E-MAIL:
Who will be paying for the application fees: ☐ Owner ☐ Contractor ☐ Preferred Contact ☐ Other:	
Who will be paying for the Engineering Fees including Damage Deposits: ☐ Owner ☐ Contractor ☐ Agent Contact ☐ Other:	

I acknowledge that the demolition permit fee is non-refundable.

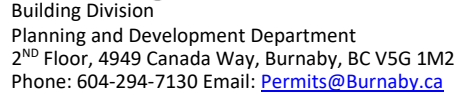
Personal information collected on this form is in accordance with s. 26(c) of the Freedom of Information and Protection of Privacy Act (RSBC 1996) for permitting purposes. Please be advised that permits are considered public records that are available in various City publications or disclosed through information requests. For questions regarding the collection, use and disclosure of personal information please contact the FOI Administrator at FOI@burnaby.ca or by calling 604-294-7944 or in person at City Hall at 4949 Canada Way, Burnaby.

Applicant Name: _____
☐ Owner ☐ Agent Contact _____ **Signature** _____ **Date** _____

COMMENTS:

Section 5: Submission Checklist

	<u>INCL</u>	<u>N/A</u>		<u>INCL</u>	<u>N/A</u>
Demolition Application Form	☐		Proof of Ownership – Transfer Form A	☐	☐
Schedule "F" Owner(s) Undertaking	☐		Tree Survey (building identified on plan)	☐	
Agent Authorization Form	☐		Demolition Waste Diversion Plan Permit	☐	



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CIRCULATION							
	Req'd	Date Forwarded	Date Returned		Req'd	Date Forwarded	Date Returned
Transportation (CP)	☐			Engineering	☐		
Community (CP)	☐						
Zoning (CP)				Trees	☐		
Siting Approval (CP)	☐						
				C & D Waste Diversion	☐		
Ecosystem (LRP)	☐						
Heritage (LRP)	☐						

[illegible]Demolition Permit Application Form - Commercial