## REQUEST FOR COMPLIANCE CERTIFICATE

5600 49 Street Beaumont AB T4X 1A1 Phone: 780-929-8782

Property Information	
Street Address:	
Plan:	
Applicant Information	
Applicant Name:	□ Agent □ Owner
Mailing Address:	
City:	Postal Code:
Phone:	Cell Phone:
Email (required)	
What are you applying for? Please select an option	
<ul> <li>COMPLIANCE CERTIFICATE         <ul> <li>Regular (10 business days)</li> <li>Express (3 business days)</li> </ul> </li> <li>COMPLIANCE CERTIFICATE REVISION         <ul> <li>A request for a revision to a Compliance Certificate or Certificate Respecting Compliance may be made within 90 days of the date of the original, at no additional cost, if the following conditions have been met:             <ol> <li>All permits identified in the original compliance report must have had their final inspections completed. Alternatively, if structures identified in the report are non-compliant have been removed, a revised Real Property Report reflecting these changes must accompany the Revision application.</li></ol></li></ul></li></ul>	
Application Requirements	
<ul> <li>Completed application request form</li> <li><u>Original</u>* Real Property Report in digital .pdf format <u>from your surveyor</u> that is not more than 5 years old</li> <li>email application request form and Original Real Property Report to <u>development@beaumont.ab.ca</u></li> <li>* NOTE: The City of Beaumont does not accept faxed, photocopied, scanned or altered Real Property Reports</li> </ul>	
Upon receipt of your application, our office will phone you to make payment arrangements.	
Applicant Authorization	
<ol> <li>I am the owner/agent with the consent and authority of the owner that is the subject matter of this application.</li> <li>I hereby give my consent to allow any authorized person pursuant to the Municipal Government Act Section 542 the right to enter the land and/or building(s) with respect to this application only.</li> <li>I consent to receiving notifications &amp; correspondence regarding this application via email to the address provided on this application.</li> <li>By checking the "I agree" box below, you agree and authorize your electronic signature be valid and binding upon you to the same force and effect as a handwritten signature.</li> </ol>	
Applicant Signature :	lagree  Date:
The personal information requested on this form is being collected under the authority of Section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act. The information collected will be used to process compliance certificates for the City of Beaumont. If you have any questions about the collection or use of your personal information, contact the City of Beaumont's FOIP Coordinator at 5600-49 <sup>th</sup> Street, Beaumont, Alberta, T4X 1A1 or 780.929.8782.	