



Works and Utilities

9215 Cedar Avenue Box 159, Summerland, BC V0H 1Z0
Phone: 250 494-0431 Fax: 250 494-3399
www.summerland.ca

Demolition Permit

THIS IS TO CERTIFY that _____

requests permission to demolish a building located at:

Lot(s) _____ District Lot _____ Plan _____ Roll No. _____

Civic Address: _____

Type of building _____ Date of demolition: _____

Approval must be obtained from the Works and Utilities Department prior to blocking off any Municipal roads.

It is the responsibility of the Owner or Contractor to arrange for all services to be disconnected by the appropriate agency prior to demolition.

The Owner and Contractor will assume all responsibility for any damage to public property.

If demolition material is to be hauled to the Summerland Sanitary Landfill site, conditions must be adhered to as follows:

1. All concrete/asphalt materials must be separated and placed in the designated locations at the landfill.
2. Materials must be source separated whenever possible. If not, increased tipping fees may apply.

Date of application: _____ Fee Paid: _____ \$100.00

Contractor/Name of Firm: _____

Contact telephone number(s): _____

Owner/Agent: _____

Contact telephone number(s): _____

Building Inspector

cc: Works and Utilities – Landfill
Works and Utilities - Electrical Utility Division
Municipal Hall - Utility Clerk
BC Assessment Authority
Fortis BC Fax: 1-877-413-1152
Telus Fax: 250-493-8154