



**BUILDING INSPECTION SERVICES
BUILDING DEMOLITION**

DEMOLITION LOCATION:

ADDRESS: _____

LOT: _____ DISTRICT LOT: _____ PLAN: _____

The following agencies are to confirm their respective services have been disconnected and left in a safe condition.

MUNICIPALITY/REGIONAL DISTRICT SERVICES (SEWER & WATER)

Print Name & Title Signature Date

FORTISBC

Print Name & Title Signature Date

BC HYDRO

Print Name & Title Signature Date

**THIS FORM MUST ACCOMPANY A COMPLETED APPLICATION
FOR A DEMOLITION BUILDING PERMIT**