



PERMIT APPLICATION

Box 10 Russell, MB R0J 1W0 ~ Phone 431-888-0136 ~ Email planning@triroads.ca ~ www.triroads.ca

Permit Type Development Building Plumbing Demolition Sign
Class of work New Addition Renovation Repair Alteration

CONTACT INFORMATION

APPLICANT Email Address _____
 Contact Information _____ Company Name _____
 Mailing Address _____ City / Province _____ Postal _____
 Phone Number _____ Alternate _____

PROPERTY OWNER *if different from Applicant Email Address _____
 Contact Information _____ Company Name _____
 Mailing Address _____ City / Province _____ Postal _____
 Phone Number _____ Alternate _____

CONTRACTOR/ BUILDER Email Address _____
 Contact Information _____ Company Name _____
 Mailing Address _____ City / Province _____ Postal _____
 Phone Number _____ Alternate _____

PROPERTY INFORMATION

Municipality of Russell Binscarth RM of Riding Mountain West

PROPERTY ADDRESS _____

PROPOSED PROJECT INFORMATION

DESCRIPTION OF WORK

No. Storeys _____ Square Footage: (list both existin(ex) and Proposed addition(P)) _____
 Main floor _____ Second Floor _____ Basement _____
 Garage _____ Addition _____ BSMT Development No Full Partial
 Deck Open _____ Covered _____ Enclosed _____
 Construction Value \$ _____ (single value not a range) Foundation Type _____

Construction Value means the total monetary worth of the final project costs, including all construction costs, material costs, and labour costs associated with the project.

Mobile Home New Used
 CSA# _____ Year _____ Make _____ Model _____ SN# _____
 Foundation Details _____ Floor plan/blocking plan/blocking detail _____



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PLUMBING INFORMATION

Floor		Water Closets	Bath Tubs	Basins	Kitchen Sinks	Laundry Tubs	Auto Washers	Showers	Dishwashers	Water Heater	Back Water Valve	Heat Recovery	Sump Pump	Floor Drains	Roof Terminals
		Basement	Outlet Fixtures												
1st	Outlet Fixtures														
2nd	Outlet Fixtures														

I undertake to observe and perform the provisions of all Dominion or Provincial statutes or regulations, the applicable by-laws, regulations or orders and plans continued in force including any applicable town Planning Scheme or Zoning By-Law, any agreement entered into affecting said land, and all specifications or instructions issued by duly authorized officers in respect of the work incidental to the subject matter of this application and if the permit involves or affects the placing or the position of any building or structure on or in respect of land, to do all work so that the building or structure will be wholly within the boundaries of the lot or parcel of land indicated in this application and to indemnify the Municipality against all losses, costs, charges, or damages caused by arising out of anything done pursuant to any permit issued under this application.

Applicant Signature _____

Owner Signature _____

Date _____

REQUIRED INFORMATION

Site Plan Building plans & Architectural Drawings
 PLD Checklist

TRI-ROADS CONTACT INFORMATION

Email planning@triroads.ca Phone 431-888-0136
 Website www.triroads.ca

OFFICE USE ONLY

Receipt Date	_____	Roll No.	_____
Received By	_____	Zone	_____
Development	\$ _____	Plumbing	\$ _____
Building	\$ _____	Other	\$ _____
Demolition	\$ _____		