

LANDSCAPING CERTIFICATE REQUEST

LOCATION

Address of the property

Civic n°

Street name

City

Province

Postal code

Lot(s) number(s)

IDENTIFICATION OF THE APPLICANT

Applicant **If the applicant is not the owner of the property, please fill up the proxy attached to this form.*

Last name

First name

Address of the applicant

Civic n°

Street name

City

Province

Postal code

Applicant's information

E-mail

Phone number

PROFESSIONNALS ON THE PROJECT

(1) Architect

Address

E-mail

Phone number

(2) Engineer

Address

E-mail

Phone number

(3) Contractor

Address

E-mail

RBQ N.

Phone number

DESCRIPTION OF WORK

Total cost of project :

Starting date of work :

Duration of work :

Signature of the applicant

Date

APPROBATION PROCESS

- **Application submission**, including all the required documentation and the payment of the analysis fees for the PIIA (if applicable).
- **Analysis and approbation by the Service of Urban Planning and Development**
 - The department reviews the request, the plans and the estimates and verifies their conformity with municipal bylaws.
- **Issuance of the permit**
 - If the request is conform and all the approbation have been obtained, the permit is ready to be issued. The applicant will be contacted by our secretary to come pick up the permit and pay the permit fees.

REQUIRED DOCUMENT (depending on the nature of the work)		
LANDSCAPING		
1	Application form	☐
2	Proxy (if necessary)	☐
3	Certificate of location to scale (may be scanned in PDF legal format, 8.5 x 14 inches)	☐
4	Landscaping plan to scale (identifies the position of the trees)	☐
5	Pictures showing the current conditions of the site	☐
6	Cost estimate, signed and dated, including the professional services fees and taxes	☐
7	Topographic plan showing the different soil levels	☐



PROXY

OWNER'S INFORMATION

Last name

First name

E-mail

Phone number

ADDRESS OF THE IMPLICATED PROPERTY

Civic n°

Street name

City

Province

Postal code

Lot (s) n°

AUTHORIZED REPRESENTATIVE'S INFORMATION

Last name

First name

E-mail

Phone number

ADDRESS OF THE REPRESENTATIVE

Civic n°

Street name

City

Province

Postal code

OWNER'S AUTHORIZATION

The owner authorizes his representative, named above, to submit to the Town of Mount Royal, one or more requests provided in the by-law, namely :

- ☐ Consult my property's file (including the plans) and obtain a copy
☐ Consult and obtain copy of the plans only
☐ Complete an application for a permit or a certificate
☐ Other request, please specify the nature :

Other request's specification

The owner also authorizes his representatives, named above, to sign the documents and commitments required for the submission of this application for the property indicated above.

OWNER'S SIGNATURE

I declare to be the owner of the building and I authorize my representative to submit to the Town of Mount Royal one or several application (s) as listed above.

Signature

Date