



Application for Transfer of Permit to New Owner

For use by Principal Authority (City of Welland)	
Application number:	Permit number (if different):
Date received:	Roll number:

Application submitted to the Office of the Chief Building Official of the City of Welland

A. Project information			
Building number, street name	Unit number	Lot/con.	
Municipality	Postal code	Plan number/other description	
Related (Building) Permit			
B. Applicant			
Applicant is: <input type="checkbox"/> Owner or <input type="checkbox"/> Authorized agent of owner			
Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number	Fax	Cell number	
C. New Owner (if different from applicant)			
Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number	Fax	Cell number	
D. Previous Owner			
Last name	First name	Corporation or partnership (if applicable)	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number	Fax	Cell number	
E. New Builder			
Last name	First name	Corporation or partnership (if applicable)	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number	Fax	Cell number	
F. Purpose of Application			
<input type="checkbox"/> Complete Project Works Specified in Permit Obtained by Previous Owner			
G. Responsibility for Work			
New owner will assume responsibility for all work completed under previous permit including work performed by previous owner.			
H. Attachments			
i. Attach copy of new deed verifying ownership of subject property.			
ii. Attach Master Plumber Commitment Form if plumbing.			
I. Declaration of Applicant			
I _____ certify that:			
(print name)			
1. The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.			
2. I have reviewed the work of previous Permit _____.			
3. I have authority to bind the corporation or partnership (if applicable).			
_____		_____	
Date		Signature of applicant	

Personal information contained in this form and schedules is collected under the authority of subsection 8(1.1) of the *Building Code Act, 1992*, and will be used in the administration and enforcement of the *Building Code Act, 1992*. Questions about the collection of personal information may be addressed to the Office of the Chief Building Official of the City of Welland.