

911 CIVIC ADDRESS

Email: Info@kingsrsc.ca I Questions: (506)-432-7530

Γι		Office Use Only	
	Date Submitted:	Prepared By:	New Number
יו	Municipality:	New Street Name:	
of Request			
Reason: New Co	onstruction Address Unkr	nown Change of Address	
ype: Residence	Commercial Other	r (specify)	
dent/Owner Info	formation		
Property Owner:	First	Last	
		Postal Code	
hone(s): (Home	e) (Wc	ork)(Cell)	
:mail:			
Other contacts as	ssociated to request:		
	•	nship:	
red Property In	iformation		
'ID (Parcel Ident	tifier Number):	First Nation Mini Ho	me Park 🗌
Community:		Road/Street:	
Civic Numbers of	f Adjacent Neighbors: (Please	state where possible)	
	or Name:	. ,	
		way: Feet or	_ Meters
Number and/o	or Name:	Same Side Opposite	
Approximate of	distance from neighbor's drive	way: Feet or	_ Meters
Oriveway or Culv	vert in: No Yes	Corner Lot: No Yes	
Shared Driveway		Subdivision: No Yes	
maroa Birromay		Plan #	
Is there an exi	kisting structure on lot? No	_	
If yes, descript	otion:		
	re visible from road: No	Yes	
s current structur	proximate structure distance from	om road: Feet / Meters	;
		Yes If yes, phone #:.	
If no, give app	ted to current structure: No		
If no, give app	ted to current structure: No	Yes Unknown	
If no, give app s phone connect Vas there a previ	vious structure on lot? No	Yes Unknown	
	re visible from road: No	Yes om road: Feet / Meters	ı