

Municipality of Dysart et al Building Department 135 Maple Avenue, Box 389 Haliburton, Ontario, KOM 1SO

Tel.: (705) 457-1740 Fax: (705) 457-1964

Website: www.dysartetal.ca

Fee: \$50.00/File Type Fee Receipt Number: Date Fee Received:

File Search Application

Property Information	<u>n:</u>				
Property Owner					
Municipal Address					
Roll # 46-24-			Township		
Lot Number	Concess	ion	Plan No	Sublot	
	Check Box fo	or Type of File R	equested <mark>(\$50.00 fee p</mark>	er file type):	
☐ Septic Installa	ation Report				
Septic Permit Number					
Year System Installed	and Owner at Tim	ie			
Prior Owners(Chain of title to 1974)					
☐ Occupancy Pe	ermit (or Final Ins	pection Report)			
Building Permit Numb	er(s)				
Type of Building (Dwe	lling, Garage, etc.)			
☐ Other Reques additional fee	ets (copies/scans o es may apply)	of specific docur	ments from specific per	rmits. Depending on extent of reques	
Request details:					
		<u>Search</u>	Requested By:		
Name & Agency:					
Address:					
Email Address:					
Telephone Number:	Business:		Home:		
				Email (should be available in 48 hours)	
Signature of Owner or Authorized Agent				 Date	