



Building Division
100 John West Way
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Aurora, ON L4G 6J1
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TOWN OF AURORA
Planning and Development Services

APPLICATION FOR TRANSFER OF
PERMIT TO NEW OWNER

A. Project Information			
Related Application Number			Plan number/other description
Municipal Address			Unit Number
Municipality	AURORA	Postal Code	Legal Description
B. Applicant			
Submission made by: ☐ Owner ☐ Authorized Agent of Owner			
Last Name		First name	Corporation or Partnership
Municipal Address			Unit Number
Municipality	Postal Code	Province	E-mail
Telephone	Mobile		
C. New Owner (if different from applicant)			
Last Name		First name	Corporation or Partnership
Municipal Address			Unit Number
Municipality	Postal Code	Province	E-mail
Telephone	Mobile		
D. Previous Owner			
Last Name		First name	Corporation or Partnership
Municipal Address			Unit Number
Municipality	Postal Code	Province	E-mail
Telephone	Mobile		
Declaration of Applicant			
I _____ declare that: (print full name) 1. The information contained in this submission, attached plans and specifications, and other attached documentation is true to the best of my knowledge. 2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership. _____ Signature _____ Date			

Personal information contained in this form and schedules is collected under the authority of subsection 8(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: a) the Chief Building Official of the municipality or upper-tier municipality to which this application is being made, or, b) the inspector having the powers and duties of a chief building official in relation to sewage systems or plumbing for an upper-tier municipality, board of health or conservation authority to whom this application is made, or, c) Director, Building and Development Branch, Ministry of Municipal Affairs and Housing 777 Bay St., 2nd Floor. Toronto, M5G 2E5 (416) 585-6666.