



**REQUEST FOR INFORMATION**

NO. \_\_\_\_\_

TO: Roads Foreman

REQUESTED BY:

Building Inspection <input type="checkbox"/>	Public Works <input type="checkbox"/>	Other:
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**LOCATE & MARK - WATER**       **SEWER**       **STORM SEWER**

**Owner Name(s):** \_\_\_\_\_

**CIVIC Address:** \_\_\_\_\_ **Folio #:** \_\_\_\_\_

**Reason:** \_\_\_\_\_

Construction of New Single Family Dwelling

Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR OFFICE USE ONLY	APPROXIMATE LOCATION AS PER FIELD CARDS?		SIZE
	YES	NO	
WATER LINE: (condition of service box)			
SEWER LINE: (condition of clean out)			
STORM LINE: (condition of clean out)			
Other Information:			

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_, 20\_\_

Copy to:

Building Inspection	
Mapping Dept.	