



BEAUMONT

5600 49 Street
Beaumont AB T4X 1A1
Phone: 780-929-8782

REQUEST FOR COMPLIANCE CERTIFICATE

Property Information

Municipal Address: _____

Plan: _____ Block: _____ Lot: _____

Applicant Information

Applicant Name: _____ ☐ Agent ☐ Owner

Mailing Address: _____

City: _____ Postal Code: _____

Phone: _____ Cell Phone: _____

Email (required): _____

What are you applying for? Please select an option

☐ **COMPLIANCE CERTIFICATE**

- ☐ Regular (10 business days)
- ☐ Express (3 business days)

☐ **COMPLIANCE CERTIFICATE REVISION**

A request for a revision to a Compliance Certificate or Certificate Respecting Compliance may be made within 90 days of the date of the original, at no additional cost, if the following conditions have been met:

1. All permits identified in the original compliance report must have had their final inspections completed. Alternatively, if structures identified in the report are non-compliant **have** been removed, a revised Real Property Report reflecting these changes must accompany the Revision application.
2. If any encroachments were identified in the original compliance report, an executed encroachment agreement must be endorsed by both parties. Alternatively, if encroachments identified in the report have been removed, a revised Real Property Report reflecting these changes must accompany the Revision application.

Application Requirements

- ☐ Completed application request form
- ☐ **Original*** Real Property Report in digital **.pdf** format *from your surveyor* that is not more than 5 years old
- ☐ email application request form and Original Real Property Report to development@beaumont.ab.ca

*** NOTE:** The City of Beaumont does not accept faxed, photocopied, scanned or altered Real Property Reports
Upon receipt of your application, our office will phone you to make payment arrangements.

Applicant Authorization

1. I am the owner/agent with the consent and authority of the owner that is the subject matter of this application.
2. I hereby give my consent to allow any authorized person pursuant to the Municipal Government Act Section 542 the right to enter the land and/or building(s) with respect to this application only.
3. I consent to receiving notifications & correspondence regarding this application via email to the address provided on this application.
4. By checking the "I agree" box below, you agree and authorize your electronic signature be valid and binding upon you to the same force and effect as a handwritten signature.

Applicant Signature : _____ I agree ☐ Date: _____

The personal information collected is authorized under Section 4(c) of the Protection of Privacy Act and is managed in accordance with the Act. It will be used to process your application and for administrative purposes directly related to the program or service for which you are applying. It may be entered into an automated system to generate content or make decisions, recommendations, or predictions. If you have questions about the collection or use of your personal information, please contact the Access and Privacy Officer at 780-929-8782.