

OFFICE USE ONLY				
Permit Number	Date Received (YYYY/M	Date Received (YYYY/MM/DD)		
				Paid
ABBUILDANIT INFORMATION				
APPLICANT INFORMATION				
Name		Business Name		
Address				
E-mail Address		Telephone Number		
L mail / ladross		rolophono rrambol		
ADDRESS OF REQUEST				
Address				
DESCRIPTION OF BUSINESS				
Provide a detailed description of the requested use				

E-mail completed form to building@london.ca. A Customer Service Representative will contact you by phone or email to pay the associated \$125.00