



OAKVILLE

Town of Oakville Application for Temporary Occupation Permit (TOP)

Date of Application: _____

Property Owner Information:

Name: _____

Address: _____

Phone No. _____ Cell No. _____

Applicant/Contractor Information (if different from Home Owner):

Name: _____

Company Name: _____

Address: _____

Phone No. _____ Cell No. _____ Fax No. _____

Site Location Information:

Address: _____

Street Occupation Information:

Start Date: _____ End Date: _____

Type of Occupancy (i.e. disposal bin, materials, equipment, construction vehicles):

Insurance Information:

Insurance Company _____

Insurance Cert. No. _____ Effective Dates: _____

(Insurance document attached listing the Town of Oakville as additional insurer for \$1 million. The Applicant agrees and accepts full responsibility for the protection of all utilities, private property and persons affected by his/her operations.) **Insurance certificate attached? Yes or No**

Costing Information:

Please contact the Road Corridor section of the Engineering & Construction Department at (905) 845-6601 x3302/3398 for current rates and fees.

Permit Cost quoted to Applicant: _____

Applicant's Signature: _____ Date: _____

Office Use Only:

**Town of Oakville
Engineering & Construction Department
1225 Trafalgar Road, Oakville, ON L6H 0H3
Tel: (905) 845-6601 x3302/3398 Fax (905) 338-4159**

Personal Information on this form is collected under the authority of the Municipal Act, 2001, as amended for processing this permit and payment thereof. Questions about the collection of personal information should be directed to: Records and Freedom of Information Officer, Clerk's Department, 905-815-6053.