



**TOWN OF OAKVILLE
BOULEVARD GARDENING PLAN APPLICATION**

OWNER	
Name:	
Company Name (if applicable):	
Address:	
Phone No.:	Email Address:

LOCATION OF PROPERTY			
Address:			
TYPE OF BOULEVARD GARDEN (check appropriate box):			
Plants	<input type="checkbox"/>	Bushes	<input type="checkbox"/>
		Mulch/Wood Chips	<input type="checkbox"/>
LIST OF PLANT SPECIES TO BE USED:			
Complete Attached Form			

I have read the requirements of the Town of Oakville By-law 2009-072 and the applicable Procedures and shall fully comply with the rules and regulations contained there-in.

Signature (Owner)

Date

FOR OFFICE USE ONLY:			
Payment Received	<input type="checkbox"/>	Utility Clearance Certificate	<input type="checkbox"/>
Detailed Scalable Plan (2 copies)	<input type="checkbox"/>	Other Town Permits If Required	<input type="checkbox"/>
Plant List (2 copies)	<input type="checkbox"/>		<input type="checkbox"/>

Date of Issue

Town Signature

Approved by:

Road Corridor Permit Coordinator

Forestry Inspector¹

- Permit Conditions:
1. Permit conditional upon compliance with Tree Protection Policy
 2. Permit valid for six (6) months from date of issue.
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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: the Engineering and Construction department.