

For Use by Township	
Date Application Received:	Date Paid:
Amount Received:	Receipt Number:
Amount Refunded:	Cheque Number:

A. Applicant Information		Applicant is: <input type="checkbox"/> Owner <input type="checkbox"/> Authorized agent of owner	
Last Name	First Name	Organization	
Street Address		Unit Number	Lot/Con.
Municipality	Postal Code	Province	E-mail
Telephone Number	Fax	Cell Number	

B. Moving Information		
Street Address	Date of Move	
Type of Load	Time of Move	
Length	Height	Weight
Load per Axle	No. of Axles	

C. Declaration of Applicant	
<p>I _____ certify that:</p> <p style="text-align: center;">(print name)</p> <ol style="list-style-type: none"> 1. I will accept total responsibility for any damages to the road surfaces and structures and any appurtenances placed upon or adjacent to the road allowance, including privately-owned structures, ditches (including both roadside and backslopes) and inground installations; 2. A deposit/retainer of \$1,000.00 will be made to the Township of Scugog and returned thirty days following the completion of the move, providing that inspection by the Public Works Department reveals that no damage has been incurred to the above; 3. I have the authority to bind the Corporation or Partnership (if applicable). 	
<p>_____</p> <p>Date</p>	<p>_____</p> <p>Signature of applicant</p>