

REQUEST FOR SERVICES
(please print or type)

Municipality: *Village of Elbow*

Address: *201 Saskatchewan St, Elbow SK S0H 1J0*

Municipal contact person: *Karen Joel 306-854-2277 elbow2@sasktel.net*

Request for (**choose 1**): Plan Review ____ Inspection ____ Inspection of existing building ____

Project name / type of work: _____

Project address: _____

Foundation soil classification and type: _____

Owner: _____ Telephone: _____

Email: _____

Designer: _____ Telephone: _____

Email: _____

Contractor: _____ Telephone: _____

Email: _____

Attached to this submission: *check all that are included*

- building permit application ____
- site plan ____
- plans ____
- specifications ____
- surveyors certificate or real property report ____
- **value of construction must be supplied!** _____
- other (please specify) _____

Additional comments: _____

Date: _____

Signature: _____