# PORTS TORONTO

## Project Planning Application

#### Submit completed application form and attachments to permitoffice@portstoronto.com

Applicant Information						
Contact Name:						
-	Last	First				
Company Name:						
Company Address:						
	Street Address					
	City		Province	Postal Code		
Phone:		Email:				
Are you an agent acting on behalf of an Operator or Tenant?			YES	NO □		
Property Location/Information						
Address/Location:						
Current Use of Subject Land/Area:						

#### **Proposed Development**

Please provide a brief description of the proposed development including use, proposed building size (height and gross area), and/or modifications to the subject property as part of the proposed development (provide attachments as needed):

### Disclaimer and Signature

The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.

Signature:

Date:\_\_\_\_