



Request For Inspection

Submit completed form to permitoffice@portstoronto.com

Contractor (Requestor) Information

The Contractor shall notify the Permit Office by the form(s) provided with a minimum notice of **5 business days** in advance of the date of any required inspection or any requested progress inspection.

FAP #: _____ Project Name: _____

Contact Name: _____
Last *First*

Company Name: _____

Company Address: _____
Street Address

City *Province* *Postal Code*

Phone: _____ Email: _____

Location & Inspection Type

Address/Exact Location of Work: _____

- Type of Inspection:
- Final Inspection
 - Progress or Partial Inspection
 - Firestopping Inspection
 - Other _____
(description)

Note: for partial occupancies, include a plan drawing of indicating the specific area required

Date and Time of Requested Inspection

Date and Time: _____

Disclaimer and Signature

The information contained in this application is true to the best of my knowledge.

Signature: _____ Date: _____