



Township of South Glengarry

6 Oak Street, P.O. Box 220, Lancaster, ON, K0C 1N0

T: (613) 347-1166 | F: (613) 347-3411

www.southglengarry.com

APPLICATION FOR TEMPORARY OUTDOOR PATIO

Property information			
Name of Business:			
Roll Number/Property Identification Number (PIN):			
Address:			Unit:
Town:	Province:	Postal Code:	
Applicant			
<input type="checkbox"/> Registered Owner <input type="checkbox"/> Authorized Agent (ensure Authorization Form is attached)			
Last Name:		First Name:	
Corporation or Partnership:			
Address:			Unit:
Town:	Province:	Postal Code:	
Phone:	Fax:	E-Mail:	
Owner (if different from applicant)			
Last Name:	First Name:	Position:	
Corporation or Partnership:			
Address:			Unit:
Town:	Province:	Postal Code:	
Phone:	Fax:	E-Mail:	
Occupancy			
Current Occupancy:		Patio Seats Proposed:	



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Duration

Please indicate dates the patio will be operational (**Please note that the Temporary Patio Permit is only valid for up to 8 months**):

Site Plan

In the area below or as a separate attachment, please include a drawing of the patio which includes:

- The location of the patio
- The dimensions of the patio
- What will be used to identify the area of the patio, such as pylons, fencing or planter boxes
- Location of the tables on the patio and distance between tables
- Exits from patio

Declaration of Applicant

I, _____ declare that:
(print name)

1. The information contained in this application is true to the best of my knowledge.
2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

Date

Signature of Applicant

Approval by Chief Building Official

Date

Chief Building Official Signature