



(Inc. 1968)  
Whitbourne Town Council  
P.O. Box 119  
35 Station Road  
Whitbourne, NL, A0B 3K0  
Office: (709)759-2780 Fax: (709) 759-2016

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**LAND DEVELOPMENT/EXCAVATION APPLICATION**

Contractor: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Cell No.: \_\_\_\_\_

This application is submitted for the purpose of:

Y **Removing Fill**

Civic address of the removal Site: \_\_\_\_\_

Please attach the Deed of Conveyance or Survey of the Excavation Site along with written consent from the owner to remove fill.

Give estimate of how much fill will be removed from this site and how long it will take to complete the excavation.

\_\_\_\_\_  
\_\_\_\_\_

**Applicant must submit a neat and legible site plan.**

**THIS APPLICATION IS MADE WITH MY KNOWLEDGE AND APPROVAL:**

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Cell No.: \_\_\_\_\_

**Privacy of Information Waiver: Signing this waiver is not mandatory and will not affect the permit process.**

I \_\_\_\_\_ agree that the information contained in the above application can be discussed at a public meeting of Council.