

For use by Principal Authority	
Application number:	Permit number (if different):
Date received:	Roll number:

To be completed PRIOR TO ISSUANCE OF A DEMOLITION PERMIT by a provincially licensed pest control company retained to provide expert rat infestation assessment and treatment if required.

A. Project Information		
Building number, street name	Unit number	Lot/con.
Municipality	Postal code	Plan number/other description

B. Pest Control Company			
Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number	Fax	Cell number	
Exterminator Class		Licence Number	

C. Property Owner			
Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number	Fax	Cell number	

D. Declaration of Pest Control Company	
I _____	declare that:
Print Name	
<b>Check one box ONLY</b>	
<input type="checkbox"/>	I have inspected the property including all structures for signs of rat infestation and saw no evidence that the demolition being applied for will impact neighbouring properties.
<input type="checkbox"/>	I have inspected the property including all structures for signs of rat infestation and preventative removal measures have been taken to address the issue of spread to neighbouring properties as a result of demolition.
I believe that this assessment will be accurate until _____ after which, a new Vermin Control Review Form will be required.	
Date	
<ol style="list-style-type: none"> <li>The information contained in this application, attached schedules and forms, attached plans and specifications, and other attached documentation is true to the best of my knowledge.</li> <li>If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.</li> </ol>	
_____	_____
Signature of Assessor	Date