

# Application to Initiate a Regional Local Improvement Project

**Do Not Complete Shaded Areas**

Region's Petition No.:
------------------------

**Property Information:**

Owner's Name / Company Name \_\_\_\_\_

Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Brampton                       Caledon                       Mississauga

Nearest Intersection \_\_\_\_\_

Lot No. \_\_\_\_\_ R-Plan No. \_\_\_\_\_ Concession \_\_\_\_\_

Business Phone Number \_\_\_\_\_ Home Phone Number \_\_\_\_\_

Email Address(optional) \_\_\_\_\_ Fax Number \_\_\_\_\_

**Owner's/Agent's Information (if applicable):**

Owner's / Agent's Name \_\_\_\_\_

Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Business Phone Number \_\_\_\_\_ Home Phone Number \_\_\_\_\_

Email Address(optional) \_\_\_\_\_ Cellular Number \_\_\_\_\_

**Type of Local Improvement (please check one):**

Watermain                       Sanitary Sewer                       Noise Wall

**Project Limits:**

**From** - House Number or Address **or** Intersection : \_\_\_\_\_

**To** - House Number or Address **or** Intersection: \_\_\_\_\_

**Reason for Request:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Please attach a letter or use a separate page if you require additional space.*

\_\_\_\_\_  
Signature of Owner/Agents

\_\_\_\_\_  
Date of Submission

Mail to: Region of Peel, Public Works, Program Planning, 10 Peel Centre Dr., Suite A, 4<sup>th</sup> Floor, Brampton, ON L6T 4B9 or fax to 905-791-0728 Attn: Mike Faye