

# Village of Merrickville-Wolford

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Request to transfer Sewage System Permit No \_\_\_\_\_ to new owner of the property.

I,

Name: \_\_\_\_\_

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

\_\_\_\_\_

Telephone No. \_\_\_\_\_

Am now the legal owner of the property for which the above Permit was issued.

My signature hereunder signifies that I wish to assume responsibility for, and will comply with, all requirements of the above-identified Sewage System Permit.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

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(Office Use)

The request to transfer Sewage System Permit No. \_\_\_\_\_ has been

Approved

Denied

\_\_\_\_\_  
Chief Building Official,  
Building Code Act

\_\_\_\_\_  
Date