



APPLICATION FOR A PARTIAL OR FULL RELEASE OF FINANCIAL SECURITIES

Section 1 – Contact Information

Registered Owner (name): _____

Contact person (if owner is a corporation): _____

Mailing Address: _____

Telephone Home: _____ Work: _____ Cell: _____

Email: _____

Applicant (name): _____

Mailing Address: _____

Telephone Home: _____ Work: _____ Cell: _____

Email: _____

Agent (name): _____

Mailing Address: _____

Telephone Home: _____ Work: _____ Cell: _____

Email: _____

Correspondence:

I/we prefer to receive correspondence in: French English

I/we prefer to receive correspondence via: Letter mail Email

Send correspondence to: Owner Applicant Agent

Section 2 – Description of the Subject Property

Please include all applicable information.

Civic Address: _____

Lot: _____ Concession: _____ Geographic Township: *Clarence*

Reference Plan Number: _____ Part(s): _____

Subdivision Plan Number: _____ Lot/Block: _____

Roll Number: _____ PIN(s): _____

Lot area: _____ m² ft² Lot depth: _____ m ft Width/frontage: _____ m ft

Section 3 – Details regarding the application

Type of Release:

Site Plan Agreement

Subdivision Agreement

Full release

Partial release

File Number: _____

Section 4 – Signatures

Signature of Owner/Applicant

Signature of Owner/Applicant

Date:

SCHEDULE A

Applicant’s Checklist

The original application is to be completed and submitted to the Infrastructure & Planning Department of the Corporation of the City of Clarence-Rockland and must be signed by all the applicant(s) and owner(s) of the affected lands. The application must be accompanied by:

- The required fees, by cash, cheque, interact or money order, payable to the City of Clarence-Rockland
- Two (2) copies of the As-built plans (hard and digital copies)
- A table of the estimated costs demonstrating the works that are completed to date

SCHEDULE B

Release of Financial Securities Application Fees

\$249.00

Personal information contained on this form is collected pursuant to the *Municipal Freedom of Information and Protection of Individual Privacy Act* and will be used for the purpose of responding to your request. Questions about this collection should be directed in writing to the Freedom of Information and Privacy Coordinator of the City of Clarence-Rockland.