



P.O. Box 129, 1 Bailey Street, Port Carling, Ontario, P0B 1J0
 Website: www.muskokalakes.ca
 Phone: 705-765-3156 Fax: 705-765-6755

LICENSE AGREEMENT APPLICATION

DATE: _____ ROLL #: _____

REGISTERED PROPERTY OWNER(S): _____

MAILING ADDRESS: _____

POSTAL CODE: _____ PHONE: _____

E MAIL: _____

MUNICIPAL ADDRESS OF PROPERTY: _____

FORMER MUNICIPALITY: _____

CONCESSION: _____ LOT: _____ PLAN: _____ PART: _____

TYPE OF ENCROACHMENT _____

TYPE OF MUNICIPAL LAND _____

I/We hereby apply to the Township of Muskoka Lakes for a license agreement to legalize the noted encroachment situated on municipally owned land. All registered property owners have signed below and are in agreeance of this application.

I/We confirm that I/We have read and understand Township Council Policy C-LS-07 for License Agreements and acknowledge that I/We are responsible to pay all legal, surveying and administrative costs involved in the process and will be obligated to pay to the Township the annual license agreement fee as directed by the municipality pursuant to policy C-LS-07.

Submitted herewith is the following:

- (1) Required application fee of _____ \$ 700.00 (new application) OR
 _____ \$ 400.00 (renewal application).
- (2) A sketch or site plan showing the location of the encroachment on the Township owned property.

Registered Property Owner(s):

 Signature Signature

I/We hereby appoint the following agent/solicitor to act on our behalf and are aware that the Township Solicitor must be used for the License Agreement process. Any other solicitor or agent acting on my/our behalf is at my/our expense and is in addition to any fees required by the Township Solicitor. Appointment of an agent/solicitor is optional.

Name of Agent/Solicitor: _____

Address: _____

Phone: _____

Email: _____

The personal information on this form is being collected pursuant to the Municipal Freedom of Information and Protection of Privacy Act and the Municipal Act, for the principle purpose of processing this application. Questions about this collection should be directed to the Clerk, Township of Muskoka Lakes, Box 129, Port Carling, Ontario, P0B 1J0, (Telephone 705-765-3156).

For Office Use Only			
Date received:	Received by:	Payment received:	Receipt #: