

THE CORPORATION OF THE TOWNSHIP OF MUSKOKA LAKES

1 BAILEY STREET, P.O. BOX 129, PORT CARLING, ON POB 1J0

## **Application for Telecommunication Tower**

## **Municipal Support Resolution**

FOR	OFFICE USE ONLY:			
APPLICATION #: ROLL #:			DATE:	
RECE	:IPT #: CIVIO	C (911) ADDRESS:		
Sche	dule #: Asse	essment Map #:		
1.	REGISTERED OWNER(S)			
	Name			
	Address			
	Telephone	Fax / Email		
2.	PERSON / COMPANY PERFORMING WORK	<u> </u>		
	Name			
	Address			
	Telephone	Fax / Email		
	Please specify to whom all correspondence sh	ould be sent :	Owner	Person/Co.
3.	LEGAL DESCRIPTION OF PROPERTY			
	Geographic or Former Township			
	Lot Number	Concession		
	Registered Plan Number (if any)			
	Reference Plan Number (if any)		Part Number	
	Civic / 911 Address			
4.	LAND USE			
	Existing			
	Proposed			
5.	PROPERTY CHARACTERISTICS			
	Water Frontage	Road Frontage	e	
	Lot Area		h	
e			showing prop	orty boundaries project
6.	DESCRIPTION OF PROPOSAL (with attached inventory map showing property boundaries, project location, size, access, and tower height)			
	Date	Owner's/Perso	on (Co.) Signatu	re
FEE:	Tower 30 metres in height or less	\$1,200.00		
	Tower greater than 30 metres in height	\$1,800.00		
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The personal information on this form is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act, R.S.O.1990, M.56. S.29(1)(g), 31(b). The information will be used for the purposes of administering this project. The information collected will be protected with appropriate security safeguards. All questions or concerns with respect to the collection, storage, use or retention of the information you provide on this form may be directed to the Township Clerk, 1 Bailey Street Port Carling Ontario P0B 1J0, telephone at 705-765-3156