

Farm Parcel Municipal Address Application

City of Port Colborne Fire & Emergency Services

3 Killaly Street West Port Colborne, Ontario L3K 6H1 Tel:905-834-4512 Fax:905-835-1020

Section 1 – Applicant Information	
Name	
Mailing Address (Street address, unit number, city and po	ostal code)
Phone Number	E-mail Address
Section 2 – Property Information	
Assessment Roll Number	Registered Owner
Legal Description (Lot, concession, registered plan, etc.)	
Municipal Road Name	Side of the Municipal Road
•	□ North □ South □ East □ West
Closest 911 Address	
Please provide a site plan marking the field entrance for y will help identify the entrance. Section 3 – Declaration	our requested address and any other documents that
I,, acknowledge	that approval of a farm parcel address request:
 Is to assist in emergency situations only; Does not permit further use or development of the Does not constitute the approval of an entrance for safe for use or that it meets any municipal entrance Does not guarantee that access is adequate for enadequate, emergency vehicles may not be able to Requires the land owner to maintain and keep the remains visible and is maintained. Should signage owner shall contact the Town for replacement/rep. 	om a public highway nor does it deem the access ce standards; mergency vehicles and where access is not o enter the property; e access in good repair and ensure the signage e be damaged, knocked down or removed the land
Signature	Date
For Staff Use Only	Date
Fee Received: Receipt No.:	Address Assigned:
Date of Department/Agency Notification:	Staff Signature: