

CALIBER PROPERTY MANAGEMENT & CONSULTING INC.

4168 Finch Ave East, Unit G50, TORONTO, ONTARIO, CANADA M1S 3V1
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RENOVATION APPLICATION FORM

1. Address:	Suite:
2. Type of Renovation:	
Description:	
3. Particulars of Contractor Hi	red:
Name of the Company:	
Contact Person:	Email:
Telephone Number:	Fax Number:
Liability Insurance (company/pol	licy#):
4. Date of Renovation:	
From:	To:
Approved by:	(Member of the Board/Landlord)
Approved by:	
	(Property Manager)
Special conditions required for the	nis approval:
Note: All drawings/plans have t	to be submitted together with this application form.
Signature of Owner/Tenant	Date