BEACONSFIELD

## URBAN PLANNING AND MUNICIPAL PATROL DEPARTMENT

### LANDSCAPING CONTRACTOR

Business name _____

Owner's surname and given name _____

Address _____

Municipality and postal code _____

Telephone number _____

Owner's personal telephone number _____

Owner's or business email address _____

### DESCRIPTION OF ROAD VEHICLES USED

**(vehicles used to transport equipment relative to landscaping or to pull or not a trailer)**

| Brand | Model | Year | License no. |
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The following documents must be included with your request:

a) A proof of insurance for each road vehicle

b) A copy of the registration certificate of each road vehicle

c) A proof that the firm has public liability insurance

d) A copy of the declaration of registration in the register of sole proprietorships, partnerships and legal persons by the landscaping contractor

If the landscaping contractor is a legal person, the address of its head office and a copy of the incorporation documents of the said legal person.

e) The payment of $50 for each vehicle used, in cash or by certified cheque.

Date :_____ Signature :_____

Return this form duly completed with all documents and the payment to the following address:

City of Beaconsfield
303, boulevard Beaconsfield,
Beaconsfield (Québec) H9W 4A7