

Cancellation Request

Building Permit, Sign & Zoning Certificates

Planning and Building Department
Building Division
3rd Floor, 300 City Centre Drive
Mississauga, ON L5B 3C1
905 615 4311
www.mississauga.ca



Date: _____

ISSUED BUILDING PERMIT

REQUEST/APPLICATION FOR PERMIT (NOT YET ISSUED)

ZONING CERTIFICATE

REQUESTOR INFORMATION

Name: _____

Company Name: _____

Phone number: _____

Please be advised that I wish to cancel the following request/building permit/
building permit application/zoning certificate/sign permit.

I am aware that an inspection *may* be required prior to cancellation to ensure the work was not started.

I am fully aware that if I wish to proceed with the proposed scope of work at any point in the future, I will need to apply for a new building permit application.

Request/Application/Permit number: _____

Address: _____

Reason for cancellation:

Requestor's Signature

Property Owner's signature

Requestor's Name

Property Owner's Name & Company Name

Email this completed form to eplansadmin@mississauga.ca
with subject line "Cancellation Request - INSERT PERMIT NUMBER"