ST. J@HN'S

LEG - Letter of Tolerance Request

Legal Department

SECTION 1

PLEASE PRINT

Requestor's Contact Information

Letter of Tolerance Request

| LEG - Letter of Tolerance Requ | uest | | Legal Department |
|--|---|-------------------|---------------------------------------|
| Signature of Applicant | | | SECTION 4 |
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| | | | |
| | | | |
| Signature | | Date (yyyy/mm/dd) | |
| Oignature | | Date (yyyy/min/c | 14) |
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| Privacy Notice | | | SECTION 5 |
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| Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed in order to process and adjudicate requests for Letters | | | |
| of Tolerance. Questions about the collection and use of the information may be directed to the City | | | |
| Solicitor, Legal Department via email <u>legal@stjohns.ca</u> or telephone at 709-576-8641. | | | |
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| Please send completed | Legal Department | For fu | rther information: |
| form to: | P.O. Box 908, 10 New Gower St. John's, NL A1C 5M2 | Street Phone | e: (709) 576-8641 legal@stjohns.ca |

