

## SAN JUAN/LAVENTILLE REGIONAL CORPORATION

M.T.S Plaza, Aranguez Main Road, **Aranguez.** Tel: 638-1073 Fax: 638-4470

## FORM B

## **APPLICATION FOR COMPLETION CERTIFICATE**

Completion Certificate No.:	Date:
Approval Building Application No.:	
Notice by Owner or Builder of the completion of work required by the Public Health (Streets and Buildings) bye-laws 1935, No. 36:	
To the Secretary, Local Authority, San Juan/Laventille Regional Corporation	
I hereby give you notice that I have completed the works required to by executed with reference to building located at	
and that the same are ready for inspection.	
Signature of Owner or Builder	Contact No.
Signature of Owner of Bunder	Contact Ivo.
Name of Owner of Builder (Please Print)	
(Flease Filitt)	
Report and Recommendation of Building Inspector:	
APPROVED	
Building Inspector	Secretary of Local Authority
Date	Date