



**Municipality of  
Magnetawan**

4304 Highway 520 PO Box 70, Magnetawan, ON P0A 1P0

Phone: 705-387-3947 Fax: 705-387-4875

**APPLICATION FOR CIVIC ADDRESS**

*Authorized under By-law 2001-18 Numbering of Properties*

**Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Property Roll #:** \_\_\_\_\_

**Lot:** \_\_\_\_\_ **Concession:** \_\_\_\_\_

**Street / Access:** \_\_\_\_\_

**Fees as per Current Fees Bylaw**

Civic Address Sign & Post: \$40

Replacement Sign Only: \$20

Replacement Post Only: \$20

**You must have a valid entrance to be eligible to receive a civic address**

_____	_____
Signature	Date
<p><i>I certify that all information on this application is true to the best of my knowledge and further, that I have read, understand and will fulfill my obligations under the Municipality's By-law 2001-18 Numbering of Properties.</i></p>	

**Office Use Only**

Civic Number Assigned: \_\_\_\_\_