

NOTICE TO EVALUATOR FOR UPDATE OF PROPERTY FILE

1. 1. Applicant (Owner or authorized representative)
Name Phone number
Address
E-mail
2. Location of work
Registration number
Cadastre
Address of the building
GPS coordinates
Rental file number
3. Characteristics of work - Main Building
□ Construction □ Renovation □ Enlargement □ Demolition
Size of existing or future building Size of the enlargement Size of the demolished building
Start of work scheduled on End of work scheduled on Cost of the work Work description:
4. Characteristics of Work - Secondary Building
□ Garage □ Shed □ Commerce □ Quay □ Septic installation □ Warehouse □ Others Dimension
Start of work scheduled on End of work scheduled on Cost of the work Work description:

5. Building sketch – Please attach your plan to your shipment														
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6. Description of the building

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PLEASE CHECK \(\sum_{\text{order}}\)										
DESCRIPTION DU BÂTIMENT / BUILDING DESCRIPTION										
FOUNDATION	PILLARS EXCAVATED PIL	LARS SOLE PLATE SOLE PLATE WALL	FOOTING BASEMENT							
ROOF	ASPHALT SHINGLES	☐ TIN SHEET	PAPER							
CEILINGS	☐ WALL PANELS ☐ PLYWOOD	GYPSUM BOARD BOARDS	CEILING TILES NONE							
PARTITIONS	WALL PANELS PLYWOOD	GYPSUM BOARD BOARDS	ORIENTED STRAND BOARD NONE							
FLOORS	☐ LINOLEUM ☐ CARPET ☐ TILE FLOOR	☐ TILES ☐ LAMINATED FLOOR	PAINT NONE							
HEATING	☐ WOOD STOVE ☐ OIL HEATER ☐ NONE	BUILT-IN-FIREPLACE ELECTRIC BASEBOARDS	☐ NON BUILT-IN-FIREPLACE ☐ GAS HEATER							
ELECTRICITY	GENERATOR	SOLAR PANEL	ELECTRICAL PANEL							
WATER HEATER	NONE	GAS	ELECTRIC							
PLUMBING HOW MANY ?	☐ WASHBASIN ☐ SHOWER	SINK TOILET	☐ BATH ☐ NONE							
SEPTIC INSTALLATION	SEPTIC TANK SEPTIC BED	CATCH BASIN NONE	ABSORBING WELL							
WATER SUPPLY	SHALLOW WELL DRINKABLE	ARTESIAN WELL NON DRINKABLE	BY GRAVITY NONE							
CABINETS	TOTAL L	LENGHT:	☐ METERS ☐ FEETS CABINETS FINISH: ☐ WOOD ☐ MELAMINE							
	→ WALL CABINETS :	→ BASE CABINETS: CABINET								
EXTERIOR WALLS	WOOD VINYL SIDING OTHER	ALUMINIUM SIDING CANEXEL SIDING	☐ PLYWOOD ☐ NONE							
DOORS AND WINDOWS	NUMBER OF DOORS	NUMBER OK WINDOWS	PATIO DOOR							
DECLARATION										
I certify that the informations provided in this document are correct.										
Signature		Date								