

Urban Municipal
Administrators
Association of Saskatchewan

URBAN BOARD OF EXAMINERS

Saskatchewan Urban
Municipalities Association

APPLICATION FOR OFFICE INSPECTION
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Name of Administrator	
Type of Certificate	
Certificate No. & Date	

Include a copy of your current Certificate.

Name of Municipality	
Address	
phone / fax / email	

Name of Mentor	
Mentor Contact Information	

Have you included your \$400.00 non-refundable fee payable to UMAAS. Applicant is responsible for all travel expenses such as mileage, meals & all related travel expenses. Applicant will be invoiced accordingly for travel expenses. Please note that travel expenses must be paid prior to the Board making their final decision.

I certify the above statements to be true in all respects	
Signature (Administrator)	
Date	

I certify the above statements to be true in all respects	
Signature (Mayor)	
Date	

Please mail Application Form and all attachments to:
Joyce L. Aitken, Secretary
Box 16
Eyebrow, SK. S0H 1L0
Phone: (306) 796-2288 Fax: (306) 796-4627
Email: townofcentralbutte@sasktel.net