

**APPLICATION FOR PERMIT
ACTING CLERK**

Name of Municipality	
Address phone / fax / email	

Name of Person Hired	
Position	Acting Clerk

When is/was the Acting Clerk's first day of work?	
Has the Acting Clerk submitted an application for a Conditional Certificate?	

Please advise why a permit is being requested at this time: _____

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

Please mail Application Form and all attachments to:
Joyce Aitken, Secretary
Urban Board of Examiners
103 Brookhurst Crescent
Saskatoon, SK
S7V 1C5 Phone : 796-7633