



**DATE:**

**To: Capital Regional District  
BUILDING INSPECTION OFFICE  
Salt Spring Island**

**Ph: 250.537.2711**

**Fx: 250.537.9633**

This is a request for the file information you have on the property listed below. A copy of the listing contract is attached. Please fax to 250.537.2046.

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

**Legal:** \_\_\_\_\_

**Woodstove Approval?** \_\_\_\_\_

**Certificate of Location on File?** \_\_\_\_\_

Thank you for your attention to this matter.

Sincerely,

Kelly Regen  
Macdonald Realty Salt Spring