

City of Stratford Building & Planning Dept.
82 Erie Street, 2nd Floor
Stratford, ON
N5A 2M4

Date:

File:

RE: Letter of Compliance SWM – SPA#: _____

Municipal Address: _____

I, _____, a Professional Engineer registered in
the Province of Ontario, do hereby certify that _____

have completed inspections on the storm water management facilities of SPA # _____.
municipally known as _____. Based on these
inspections, I certify the work has been completed and in my professional opinion these
works have been completed in general compliance to the approved storm water
management report.

PROFESSIONAL ENGINEER: _____

ENGINEERING FIRM: _____

