

## **Application for a Permit to Construct or Demolish**

| For use by Principal Authority               |                     |                                    |                                |                               |              |                    |  |
|--|---------------------|------------------------------------|--------------------------------|-------------------------------|--------------|--------------------|--|
| Application number:                          |                     |                                    | Permit number (if different):  |                               |              |                    |  |
| Date received:                               |                     |                                    | Roll number:                   |                               |              |                    |  |
| Application submitted to:(Name of municipali | ity, upper-tier mun | icipality, bo                      | ard of health or con           | servatio                      | n authority) |                    |  |
| A. Project information                       |                     |                                    |                                |                               |              |                    |  |
| Building number, street name                 |                     |                                    |                                |                               | Unit number  | Lot/con.           |  |
| Municipality                                 | Postal code         |                                    |                                | Plan number/other description |              |                    |  |
| Project value est. \$                        |                     |                                    | Area of work (m <sup>2</sup> ) |                               |              |                    |  |
| B. Purpose of application                    |                     |                                    |                                |                               |              |                    |  |
| New construction Addition to existing build  | ling                | Alteratio                          |                                |                               | Demolition   | Conditional Permit |  |
| Proposed use of building Current             |                     |                                    | ent use of building            |                               |              |                    |  |
| Description of proposed work                 |                     |                                    |                                |                               |              |                    |  |
| C. Applicant Applicant is:                   | _                   | Owner or Authorized agent of owner |                                |                               |              |                    |  |
| Last name                                    | First name          | Corporation or partnership         |                                |                               |              |                    |  |
| Street address                               |                     |                                    |                                |                               | Unit number  | Lot/con.           |  |
| Municipality                                 | Postal code         |                                    | Province                       |                               | E-mail       |                    |  |
| Telephone number                             | Fax                 |                                    |                                |                               | Cell number  |                    |  |
| D. Owner (if different from applicant)       |                     |                                    |                                |                               | L            |                    |  |
| Last name                                    | First name          |                                    | Corporation or p               | partners                      | hip          |                    |  |
| Street address                               | I                   |                                    | L                              |                               | Unit number  | Lot/con.           |  |
| Municipality                                 | Postal code         |                                    | Province                       |                               | E-mail       |                    |  |
| Telephone number                             | Fax                 |                                    |                                |                               | Cell number  |                    |  |



#### Application for a Permit to Construct or Demolish

| E. Builder (Optional)   |                         |  |            |        |          |  |
|---|-------------------------|--|------------|--------|----------|--|
| Last name   | First name              | Corporation or partnership (if applica |            |        |          |  |
|   |                         |  |            |        |          |  |
| Street address  |                         |  | Unit numbe | er     | Lot/con. |  |
| Mariain aliter  | Dontal anda             | Drevines                               | Г a il     |        |          |  |
| Municipality  | Postal code             | Province                               | E-mail     |        |          |  |
| Telephone number  | Fax                     |  | Cell numbe | er     |          |  |
| ·   |                         |  |            |        |          |  |
| F. Tarion Warranty Corporation (O   | ntario New Home Warrant | y Program)                             |            |        |          |  |
| i. Is proposed construction for a new home as defined in the <i>Ontario New Home Warranties</i> Plan Act? If no, go to section G.   |                         |  |            |        |          |  |
| ii. ii. Is registration required under the Ontario New Home Warranties Plan Act?  |                         |  |            |        |          |  |
| iii. If yes to (ii) provide registration number(s):   |                         |  |            |        |          |  |
| G. Required Schedules   |                         |  |            |        |          |  |
| i) Attach Schedule 1 for each individual who reviews and takes responsibility for design activities.  |                         |  |            |        |          |  |
| ii) Attach Schedule 2 where application is  |                         | repair a sewage sys                    | tem.       |        |          |  |
| i) This application meets all the requirement   |                         | o (d) of Division C o                  | f the      |        |          |  |
| i) This application meets all the requirements of clauses 1.3.1.3 (5) (a) to (d) of Division C of the Building Code (the application is made in the correct form and by the owner or authorized agent, allapplicable fields have been completed on the application and required schedules, and all required schedules are submitted).                             |                         |  |            |        |          |  |
| ii) This application is accompanied by the plans and specifications prescribed by the applicable by-law, resolution or regulation made under clause 7(1)(b) of the <i>Building Code Act</i> , 1992.   |                         |  |            |        | No       |  |
| iii) This application is accompanied by the information and documents prescribed by the applicable by-<br>law, resolution or regulation made under clause 7(1)(b) of the <i>Building Code Act, 1992</i> which enable<br>the chief building official to determine whether the proposed building, construction or demolition will<br>contravene any applicable law. |                         |  |            |        | No       |  |
| iv) The proposed building, construction or demolition will not contravene any applicable law  |                         |  |            | Yes    | No       |  |
| I. Declaration of applicant   |                         |  |            |        |          |  |
|   |                         |  |            |        |          |  |
| I(print name)   |                         |  |            | declar | re that: |  |
| (pink name)   |                         |  |            |        |          |  |
| <ol> <li>The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.</li> <li>If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.</li> </ol>   |                         |  |            |        |          |  |
| Date Signature of applicant   |                         |  |            |        |          |  |

Personal information contained in this form and schedules is collected under the authority of subsection 8(1.1) of the Building Code Act, 1992, and will be used in the administration and enforcement of the Building Code Act, 1992. Questions about the collection of personal information may be addressed to: a) the Chief Building Official of the municipality or upper-tier municipality to which this application is being made, or, b) the inspector having the powers and duties of a chief building official in relation to sewage systems or plumbing for an upper-tier municipality, board of health or conservation authority to whom this application is made, or, c) Director, Building and Development Branch, Ministry of Municipal Affairs and Housing 777 Bay St., 2nd Floor. Toronto, M5G 2E5 (416) 585-6666



| A. Road Work Permit  |        |  |  |  |  |
|--|--------|--|--|--|--|
| A Road Work Permit is required of all persons, agencies, corporations (private or public), or institutions to occupy or close any Township Road, sidewalk, boulevard, or right-of-way to complete work. Including, but not limited to, storage bin, waste bin, parked equipment, sidewalk closure, etc. Properties adjacent to Regional Roads must apply for a Region of Waterloo Work Permit.   |        |  |  |  |  |
| Is a Road Work Permit required for the work being applied for under this building permit?  | Yes No |  |  |  |  |
|  |        |  |  |  |  |
| B. Entrance Permit   |        |  |  |  |  |
| An Entrance Permit may be required of all persons, agencies, corporations (private or public), or institutions for a new entrance (driveway) or change to an existing entrance on any Township Road. Entrances on a Regional Road must apply for a Region of Waterloo Access Permit.   |        |  |  |  |  |
| Is an Entrance Permit required for the work being applied for under this building permit?  | Yes No |  |  |  |  |
|  |        |  |  |  |  |
| C. Municipal Park & Trail Property Access  |        |  |  |  |  |
| A Permission to Access Park & Trail Property Permit is required anytime a contractor or homeowner plans to enter onto Township owned parkland, greenspace, or trails with any type of equipment or vehicle for the purpose of accessing private property. This policy is aimed to control access, prevent any damage to Township owned lands, and ensure the safety of park and trail users. A Permission to Access Park & Trail Property permit is required when crossing Township lands to carry out activities on private property, including but not limited to, landscaping, pool construction, deck or fence construction, or delivery of materials. If Township owned parkland, greenspace, or trails are accessed outside of this process, the Township may hold those parties responsible for any and all resulting damages, and parties may be prosecuted to the full extent of the law. |        |  |  |  |  |
| Is a Permission to Access Park & Trail Property Permit required for the work being applied for under this building permit?   | Yes No |  |  |  |  |

### **Schedule 1: Designer Information**

Use one form for each individual who reviews and takes responsibility for design activities with respect to the project. A. Project Information Building number, street name Unit no. Lot/con. Municipality Postal code Plan number/ other description B. Individual who reviews and takes responsibility for design activities Name Street address Unit no. Lot/con. Municipality Postal code Province E-mail Telephone number Fax number Cell number C. Design activities undertaken by individual identified in Section B. [Building Code Table 3.5.2.1. of **Division C1** HVAC - House **Building Structural** House Small Buildings **Building Services** Plumbing - House Large Buildings Detection, Lighting and Power Plumbing - All Buildings Complex Buildings On-site Sewage Systems Fire Protection Description of designer's work **Declaration of Designer** declare that (choose one as appropriate): (print name) I review and take responsibility for the design work on behalf of a firm registered under subsection 3.2.4.of Division C, of the Building Code. I am qualified, and the firm is registered, in the appropriate classes/categories. Individual BCIN: Firm BCIN: I review and take responsibility for the design and am qualified in the appropriate category as an "other designer" under subsection 3.2.5.of Division C, of the Building Code. Individual BCIN: Basis for exemption from registration: The design work is exempt from the registration and qualification requirements of the Building Code. Basis for exemption from registration and qualification: I certify that: 1. The information contained in this schedule is true to the best of my knowledge. 2. I have submitted this application with the knowledge and consent of the firm.

#### NOTE:

Date

- 1. For the purposes of this form, "individual" means the "person" referred to in Clause 3.2.4.7(1) (c).of Division C, Article 3.2.5.1. of Division C, and all other persons who are exempt from qualification under Subsections 3.2.4. and 3.2.5. of Division C.
- 2. Schedule 1 is not required to be completed by a holder of a license, temporary license, or a certificate of practice, issued by the Ontario Association of Architects. Schedule 1 is also not required to be completed by a holder of a license to practise, a limited license to practise, or a certificate of authorization, issued by the Association of Professional Engineers of Ontario.

Signature of Designer

# **Schedule 2: Sewage System Installer Information**

| A. Project Information   |                             |                          |             |           |  |  |
|--|-----------------------------|--------------------------|-------------|-----------|--|--|
| Building number, street name   | uilding number, street name |                          | Unit number | Lot/con.  |  |  |
| Municipality   | Postal code                 | Plan number/ other descr | ption       |           |  |  |
| B. Sewage system installer   |                             |                          |             |           |  |  |
| Is the installer of the sewage system engaged in the business of constructing on-site, installing, repairing, servicing, cleaning or emptying sewage systems, in accordance with Building Code Article 3.3.1.1, Division C?  Yes (Continue to Section C)  No (Continue to Section E)  Installer unknown at time of application (Continue to Section E) |                             |                          |             |           |  |  |
| C. Registered installer informatio   | n (where answ               | er to B is "Yes")        | •••         | ,         |  |  |
| C. Registered installer information (where answer to B is "Yes")  Name   |                             |                          | BCIN        |           |  |  |
| Street address   |                             |                          | Unit number | Lot/con.  |  |  |
| Sileet address   |                             |                          | Offichamber | LOI/COIT. |  |  |
| Municipality   | Postal code                 | Province                 | E-mail      |           |  |  |
| Telephone number   | Fax                         |                          | Cell number |           |  |  |
| D. Qualified supervisor information (where answer to section B is "Yes")   |                             |                          |             |           |  |  |
| Name of qualified supervisor(s)  Building Code Identification Number (BCIN)  |                             |                          |             |           |  |  |
|  |                             |                          |             |           |  |  |
|  |                             |                          |             |           |  |  |
|  |                             |                          |             |           |  |  |
| E. Declaration of Applicant:   |                             |                          |             |           |  |  |
|  |                             |                          |             |           |  |  |
| 1  | I declare that:             |                          |             |           |  |  |
| (print name)   |                             |                          |             |           |  |  |
| I am the applicant for the permit to construct the sewage system. If the installer is unknown at time of application, I shall submit a new Schedule 2 prior to construction when the installer is known;   |                             |                          |             |           |  |  |
| <u>OR</u>  |                             |                          |             |           |  |  |
| I am the holder of the permit to construct the sewage system, and am submitting a new Schedule 2, now that the installer is known.   |                             |                          |             |           |  |  |
| I certify that:  |                             |                          |             |           |  |  |
| 1. The information contained in this schedule is true to the best of my knowledge.   |                             |                          |             |           |  |  |
| 2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.  |                             |                          |             |           |  |  |
| Date Signature of applicant  |                             |                          |             |           |  |  |