Application for a Permit to Construct or Demolish This form is authorized under subsection 8(1.1) of the *Building Code Act*, 1992

For use by Principal Authority							
Application number:			Permit number (if different):				
Date received:			Roll number:				
Date received.				nbei.			
Application submitted to:							
(Name of municipali	ity, upper-tie	er munici	ipality, bo	ard of health or cons	ervation authority)		
A. Project information							
Building number, street name					Unit number	Lot/con.	
Municipality	Postal c	ode		Plan number/oth	er description		
Municipairty	Municipality Postal code			Plan number/other description			
Project value est. \$				Area of work (m ²)		
B. Purpose of application							
	New construction Addition to an existing building		Alteration	n/repair	Demolition	Conditional Permit	
			nt use of	building			
Description of proposed work							
C. Applicant Applicant is:		er or	Au	uthorized agent of owner			
Last name	First name C			Corporation or partnership			
Street address					Unit number	Lot/con.	
Municipality	Postal code		Province	E-mail			
Talankana numbar	Fox			Call sumbar	Cell number		
Telephone number	Fax			Cell number			
D. Owner (if different from applicant)							
Last name First name Corporation or partnership							
Street address					Unit number	Lot/con.	
Municipality	Dectal	ada		Drovinos	E meil		
Municipality	Postal code		Province	E-mail	E-mail		
Telephone number	Fax				Cell number		

E. Builder (optional)						
Last name	First name	Corporation or partners	hip (if appli	icable)		
Street address			Unit num	her	Lot/con.	
			Onichan		Lot/con.	
Municipality	Postal code	Province	E-mail			
Telephone number	Fax Cell number					
F. Tarion Warranty Corporation (Ontario	New Home Warrant	y Program)				
i. Is proposed construction for a new home as defined in the <i>Ontario New Home Warranties</i> <i>Plan Act</i> ? If no, go to section G.					° [No
ii. Is registration required under the Ontar	io New Home Warrantie	s Plan Act?		Yes	;	No
iii. If yes to (ii) provide registration number	: (s):		·	·		
G. Required Schedules	(-).					
i) Attach Schedule 1 for each individual who rev	views and takes respons	ibility for design activities.				
ii) Attach Schedule 2 where application is to con	struct on-site, install or re	epair a sewage system.				
H. Completeness and compliance with a	applicable law					
 This application meets all the requirements o Building Code (the application is made in the applicable fields have been completed on the schedules are submitted). 	correct form and by the	owner or authorized ager		Yes	;	No
Payment has been made of all fees that are required, under the applicable by-law, resolution or regulation made under clause 7(1)(c) of the <i>Building Code Act, 1992</i> , to be paid when the application is made.						No
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, 1992</i> .					No	
iii) This application is accompanied by the information and documents prescribed by the applicable by- law, resolution or regulation made under clause 7(1)(b) of the <i>Building Code Act, 1992</i> which enable the chief building official to determine whether the proposed building, construction or demolition will contravene any applicable law.						No
iv) The proposed building, construction or demo	lition will not contravene	any applicable law.		Yes	; [No
I. Declaration of applicant						
				مام	Java that	
(print name)				ueu	clare that	
 The information contained in this applic documentation is true to the best of my If the owner is a corporation or partners 	knowledge.				er attache	ed
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.

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 descrip	tion	
B. Individual who reviews and takes	responsibilit	ty for design activities		
Name		Firm		
Street address			Unit no.	Lot/con.
Municipality	Postal code	Province	E-mail	
Telephone number	Fax number		Cell number	
C. Design activities undertaken by i Division C]	ndividual ider	ntified in Section B. [Buil	Iding Code Tab	le 3.5.2.1. of
House Small Buildings Large Buildings Complex Buildings Description of designer's work	HVAC – House Building Structural Building Services Plumbing – House Detection, Lighting and Power Plumbing – All Buildings Fire Protection On-site Sewage System			g – House g – All Buildings
D. Declaration of Designer				
I(print name	2)	de	eclare that (choose	e one as appropriate):
I review and take responsibility C, of the Building Code. I am qu	for the design w			
Individual BCIN:			_	
Firm BCIN:			-	
I review and take responsibility under subsection 3.2.5.of Division			priate category as	an "other designer"
Individual BCIN:			-	
Basis for exemption from re	egistration:			
The design work is exempt fron	n the registratior	n and qualification requiremer	nts of the Building	Code.
Basis for exemption from re	egistration and o	qualification:		
I certify that: 1. The information contained in this s 2. I have submitted this application w				
Date		Signature of Designer		
NOTE:				

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.

Schedule 2: Sewage System Installer Information

A. Project Information						
Building number, street name	Unit number	Lot/con.				
Municipality	Postal code	Plan number/ other descr	iption			
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 Sec						
C. Registered installer information	n (where answ	er to B is "Yes")	1			
Name			BCIN			
Street address	Street address			Lot/con.		
Municipality	Postal code	Province	E-mail			
Telephone number	Fax		Cell number	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:						
l 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						