Corporation of the Municipality Of Brockton

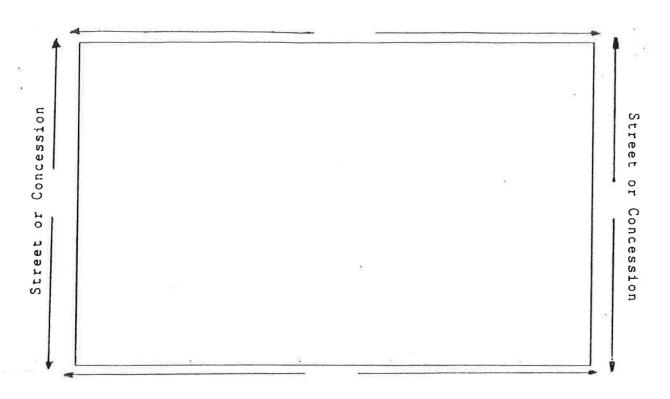


Building Dept. Building and Planning Manager/CBO, Dieter Weltz 100 Scott Street, Box 68 E-mail dweltz@brockton.ca **Inspector, Dominic Paquette** E-mail <u>dpaquette@brockton.ca</u>

Municipal Office Walkerton, Ontario NOG 2VO (519)881-2223 Fax (519)881-2991

Checklist for Building Permits

		ant:				
		Zoning Roll #				
		\(\text{\text{VII}}\)#				
✓ Items						
Required	Rec'd					
		Application- fully filled out, in	cluding Applicant's signature.			
		"Schedule 1: Designer Information of insurance, if project require	mation"- filled out including BCIN and proof s a qualified designer.			
		• •	ncluding Application fee & other applicable			
		Site Plan Agreement Appro	val			
		Site Plan				
		Plans- specifications, docume support the Application. Two	ents and other information necessary to sets of plans.			
		Record of Site Condition- if or commercial to residential or	proposed change in land use is from industrial rother more sensitive use, or where the inated- an RSC must be prepared by a			
			Permit- Town sewer system connections.			
		Sewage System Permit- Rui	ral sewage systems.			
		Ontario New Home Warrant	y Permit (TARION)			
		Letter of Understanding- po	uring concrete in cold weather.			
		Confirmation of Commitme	nt by Owner (P. Eng & Arch)			
		Lot Grading Affirmation				
		Record of Approval for NMS nutrient management plan)	or NMP (nutrient management strategy or			
		. ,	on Authority (SVCA) Approval			
		SWPA-Source Water Protec	tion			
	<u>`</u>	Signature of Applicant	Signature of Inspector			



FOR OFFICE USE ONLY - THIS IS NOT A PERMIT

Zone0		ner Lot		Plan Number			
Lot Number		Co	on Size _	X	Area		
Size of Building: W	_ L	H	Existing: W	L	Н		
Set Back: Side Yard Minimum					Yard		
Maximum Lot Coverage_		%	Lot Coverage	After Construc	tion	%	
Water: Municipal connec	tion	Available _	Requ	ired	Other		
Sewers: Available		_ Septic Sy	ystem				
Permit Fee \$		•					
Brockton, Ontario			Signatura Cl	BO or Inspecto	r		

FOR OFFICE USE ONLY STAGES OF CONSTRUCTION FOR BUILDING PERMIT

PLEASE ☑ REQUIRED INSPECTIONS

Excavation Rebar Placement Substantial completion of footings & foundation Underground plumbing/test Structural Framing Rough in plumbing test Insulation & vapour barrier Heating/Ventilation Substantial completion of all fire separation & closures All fire protection systems (standpipes, sprinklers, fire alarms, etc) Masonary fireplaces & masonary chimneys Solid fuel burning appliances Substantial completion of exterior cladding Site grading As built drawings Completion of construction & installation of components required to permit occupancy by sentences 2.4.3.1(2) & 2.4.3.2(1) Final inspection
Demolition Safety fence Sewage system installed & ready for backfill Completion of sewage system

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 r	Permit number (if different):			
Date received:			Roll nur	Roll number:			
	Name of municipalit	ty, upper-tier m	unicipality, bo	ard of health or con	nservation	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	า ⁻)		
B. Purpose of application							
New construction	Addition to an Alter existing building			n/repair	[Demolition	Conditional Permit
Proposed use of building Curre		urrent use of	ent use of building				
Description of proposed work							
C. Applicant	Applicant is:	Owner	or Au	uthorized agent of			
Last name		First name		Corporation or p	partners	hip	
Street address						Unit number	Lot/con.
Municipality Postal cod		Postal code	ostal code Province			E-mail	
Telephone number		Fax			Cell number		
D. Owner (if different fron	n applicant)						
Last name	,,	First name		Corporation or p	partners	hip	
Street address		1				Unit number	Lot/con.
Municipality		Postal code)	Province		E-mail	•
Telephone number		Fax				Cell number	

E. Builder (optional)						
			nership (if applicable)			
Street address			Unit number	Lot/con.		
Municipality Postal code Province			E-mail			
Wallopality	viunicipality Postal code Province E-ma					
Telephone number	Fax		Cell number			
F. Tarion Warranty Corporation (Ontario						
 i. Is proposed construction for a new hor Plan Act? If no, go to section G. 	e as defined in the C	Intario New Home Warranties	Yes	s No		
ii. Is registration required under the Ontar	io New Home Warrar	nties Plan Act?	Yes	s No		
iii. If yes to (ii) provide registration number	(s):					
G. Required Schedules		9 99 8 1 1 2 21 52				
i) Attach Schedule 1 for each individual who rev	•					
ii) Attach Schedule 2 where application is to con	struct on-site, install o	or repair a sewage system.				
H. Completeness and compliance with a	pplicable law					
i) This application meets all the requirements o			Yes	s No		
	Building Code (the application is made in the correct form and by the owner or authorized agent, all applicable fields have been completed on the application and required schedules, and all required					
schedules are submitted).		•				
	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.						
ii) This application is accompanied by the plans resolution or regulation made under clause 7	-law, Ye	s 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.						
iv) The proposed building, construction or demolition will not contravene any applicable law. Yes No						
I. Declaration of applicant						
(print name)			de	clare that:		
(1						
1. The information contained in this applic		dules, attached plans and spe	cifications, and oth	er attached		
documentation 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.						
2 parationally, i have alle detailed to brind the corporation of parationally.						
Date Signature of applicant						
Date	Signature	ε οι αμμιτατιί				

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 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			Unit number	Lot/con.		
Municipality Postal co		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")	•••	,		
Name	ii (Wilere allow		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	on (where ansv	ver to section B is "Yes"	')			
Name of qualified supervisor(s)		Building Code Identification	Number (BCIN)			
E. Declaration of Applicant:						
1				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						