## 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	Permit number (if different):			
Date received:		Roll nu	mher:			
Application submitted to:(Name of municipal	ity, upper-ti	ier municipality, bo	pard of health or conse	rvation authority)		
A. Project information						
Building number, street name				Unit number	Lot/con.	
Municipality	Postal code		Plan number/other	per/other description		
Project value est. \$			Area of work (m <sup>2</sup> )			
B. Purpose of application						
New construction Addition		Alteratio	n/repair	Demolition	Conditional Permit	
Proposed use of building	Current use o			f building		
Description of proposed work						
C. Applicant Applicant is:			uthorized agent of ov			
Last name	First na	me	Corporation or partnership			
Street address				Unit number	Lot/con.	
				onichambol	2000011	
Municipality	Postal code		Province	E-mail		
Telephone number	Fax			Cell number	Cell number	
D. Owner (if different from applicant)						
Last name				Corporation or partnership		
Street address				Unit number	Lot/con.	
Municipality	Postal of	code	Province	E-mail		
r7						
Telephone number	Fax		•	Cell number		

E. Builder (optional)				
Last name	First name	Corporation or partners	hip (if applicable)	
Street address			Unit number	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 hon <i>Plan Act</i> ? If no, go to section G.	ne as defined in the Onta	ario New Home Warranties	S Ye	s No
ii. Is registration required under the Ontar	io New Home Warrantie	s Plan Act?	Ye	s No
iii. If yes to (ii) provide registration number	r(s):			
G. Required Schedules				
i) Attach Schedule 1 for each individual who re-	views and takes respons	ibility for design activities.		
ii) Attach Schedule 2 where application is to con	struct on-site, install or r	epair a sewage system.		
H. Completeness and compliance with a	applicable law			
<ul> <li>This application meets all the requirements of Building Code (the application is made in the applicable fields have been completed on the schedules are submitted).</li> </ul>	correct form and by the	owner or authorized agent		s No
Payment has been made of all fees that are regulation made under clause 7(1)(c) of the <i>l</i> application is made.			Ye	s No
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 inform law, resolution or regulation made under clau the chief building official to determine whether contravene any applicable law.	ise 7(1)(b) of the Buildin	g Code Act, 1992 which er	nable	s No
iv) The proposed building, construction or demo	lition will not contravene	any applicable law.	Ye	s No
I. Declaration of applicant				
			 ah	clare that:
(print name)			uc	
<ol> <li>The information contained in this applied documentation is true to the best of my</li> </ol>	knowledge.			ner attached
2. If the owner is a corporation or partners	hip, I have the authority	to bind the corporation or	partnership.	
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 descr	iption	L	
B. Individual who reviews and takes	s responsibilit	ty for design activities			
Name	-	Firm			
Street address		1	Unit no.	Lot/con.	
Municipality	Postal code	Province	E-mail		
Telephone number	Fax number		Cell number		
C. Design activities undertaken by in Division C]	ndividual ider	ntified in Section B. [Bu	uilding Code Tal	ole 3.5.2.1. of	
House Small Buildings Large Buildings Complex Buildings	HVAC – House Building Services Detection, Lighting and Power Fire Protection		Plumbin Plumbin	Building Structural Plumbing – House Plumbing – All Buildings On-site Sewage Systems	
Description of designer's work					
D. Declaration of Designer					
I(print name I review and take responsibility	,			se one as appropriate):	
C, of the Building Code. I am qu					
Individual BCIN:					
Firm BCIN: I review and take responsibility under subsection 3.2.5.of Divisi Individual BCIN:	for the design a		 opriate category as	an "other designer"	
Basis for exemption from registration:					
The design work is exempt fron	n the registration	n and qualification requirem	ents of the Building	g Code.	
Basis for exemption from re	-			-	
I certify that: 1. The information contained in this s 2. I have submitted this application w	chedule is true	to the best of my knowledge	<del>9</del> .		
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	ng number, street name		Unit number	Lot/con.	
Municipality	Postal code	Plan number/ other description			
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 (C	Continue to Section E)		unknown at time of on (Continue to Section E)	
C. Registered installer information	n (where answ	er to B is "Yes")			
Name			BCIN		
Street address			Unit number	Lot/con.	
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:					
				declare that:	
(print name)					
I am the applicant for the permit	to construct the s	owago system. If the installe	or is unknown at time	of application. I shall	
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					