Form 1



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

For use by Principal Authority						
Application number:	Permit	Permit number (if different):				
Date received:		Roll nu	mber:			
			9-000-			
		01.00				
Application submitted to:						
(Name of municipa	lity, upper-t	ier municipality, bo	pard of health or conserv	vation 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 ²)			
B. Purpose of application						
Addition	to on				Conditional	
New construction existing by		Alteratio	n/repair	Demolition	Permit	
Proposed use of building		Current use o	f building			
Description of proposed work						
C Applicant Applicant in	0.14	ner or A	utherized egent of ou	10.0 r		
C. Applicant Applicant is: Last name	First na		uthorized agent of ow Corporation or part			
			• · · · · · · · · · · · · · · · · · · ·			
Street address				Unit number	Lot/con.	
Municipality	Postal	code	Province	E-mail		
Telephone number	Fax			Cell number		
D. Owner (if different from applicant) Last name	First na	me	Corporation or part	nershin		
	1 1151116			nersnip		
Street address				Unit number	Lot/con.	
Sheet address				Onit number		
Municipality	Postal	code	Province	E-mail		
······						
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			
 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). 	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	
 The information contained in this applied documentation is true to the best of my 	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 HVAC – House Building Structural Small Buildings Building Services Plumbing – House Large Buildings Detection, Lighting and Power Plumbing – All Building Complex Buildings Fire Protection On-site Sewage System				ıg – House ıg – All Buildings
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 re	egistration:			
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	9 .	
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 description					
B. Sewage system installer							
Is the installer of the sewage system eng emptying sewage systems, in accordance			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	n Number (BCIN)				
E. Declaration of Applicant:							
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							

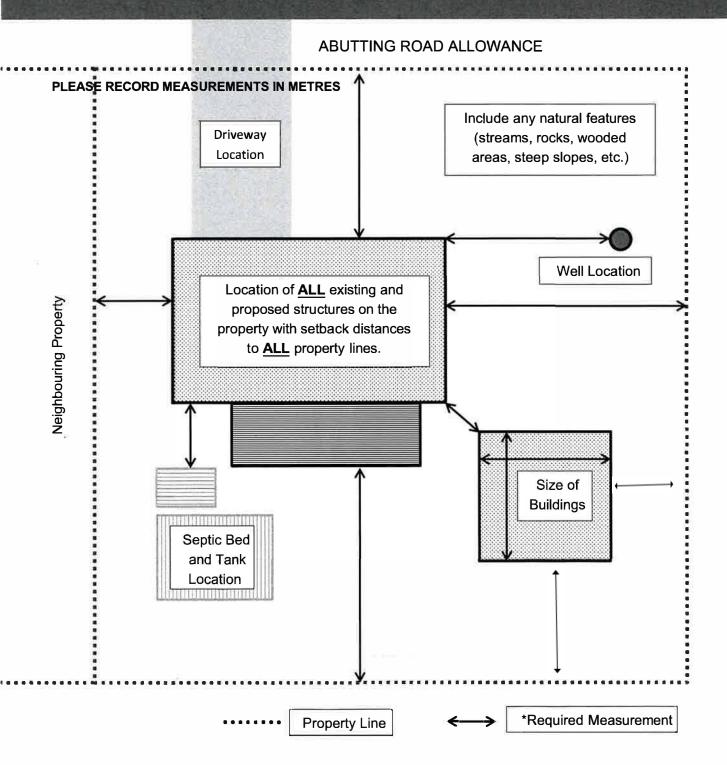


Town of Spanish Site Plan Guide and Example

It is important that an accurate and complete site plan be submitted with your application, failure to do so can result it being returned as incomplete.

Include an address block:

1234 Example Street Spanish, Ontario





AUTHORIZATION OF OWNER FOR APPLICANT OR AGENT TO MAKE THE APPLICATION

I, _____, am the owner of the land that is the subject

of an Application for a Permit to Construct or Demolish and I authorize

_____ to make this application on my behalf.

Date

Signature of Owner

AUTHORIZATION OF OWNER FOR APPLICANT OR AGENT TO PROVIDE PERSONAL INFORMATION

I, _____, am the owner of the land that is the

subject of an Application for a Permit to Construct or Demolish and for the

purposes of the

Freedom of Information and Protection of Privacy Act, I authorize

______ as my agent for this application, to provide

any of my personal information that will be included in this application or collected

during the processing of this application.

Date

Signature of Owner



COMMITMENT CERTIFICATE

THIS FORM TO BE SIGNED BY ALL CONSULTANTS RETAINED FOR GENERAL REVIEWS

Permit Application No.

Project Description:	Date:
Address of Project:	

The undersigned architect and/or professional engineer(s) hereby certify that they have been retained to provide general reviews of the parts of construction of the building indicated, to determine whether the construction is in general conformity with the plans and other documents that form the basis for the issuance of building permit, in accordance with the performance standards of the Ontario Association of Architects (OAA) and/or Professional Engineers Ontario (PEO).

The undersigned hereby certifies that he/she has read and agrees to the above

	□ STRUCTURAL	MECHANICAL		□ SITE SERVICES	□ OTHER (SPECIFY) :
Consultant Firm:		Signature:		Print Name:	
Address:				Telephone:	Fax:

ARCHITECTURAL			□ SITE SERVICES	□ OTHER (SPECIFY) :
Consultant Firm:	Signature: Print Name:		t Name:	
Address:	 		Telephone:	Fax: