

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:		
Application submitted to: _____ (Name of municipality, upper-tier municipality, board of health or conservation 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				
New construction	Addition to an existing building	Alteration/repair	Demolition	Conditional Permit
Proposed use of building		Current 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)				
Last name	First name	Corporation or partnership		
Street address			Unit number	Lot/con.
Municipality	Postal code	Province	E-mail	
Telephone number	Fax		Cell number	

E. Builder (optional)				
Last name		First name	Corporation or partnership (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 Warranty Program)				
i. Is proposed construction for a new home as defined in the <i>Ontario New Home Warranties Plan Act</i> ? If no, go to section G.			Yes	No
ii. Is registration required under the <i>Ontario New Home Warranties Plan Act</i> ?			Yes	No
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 to construct on-site, install or repair a sewage system.				
H. Completeness and compliance with applicable law				
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, 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.			Yes	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> .			Yes	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.			Yes	No
iv) The proposed building, construction or demolition will not contravene any applicable law.			Yes	No
I. Declaration of applicant				
I _____ declare that: (print name)				
1. The information contained in this application, attached schedules, attached plans and specifications, and other 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.				
_____		_____		
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 description	
B. Individual who reviews and takes responsibility 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 individual identified in Section B. [Building Code Table 3.5.2.1. of Division C]			
House	HVAC – House	Building Structural	
Small Buildings	Building Services	Plumbing – House	
Large Buildings	Detection, Lighting and Power	Plumbing – All Buildings	
Complex Buildings	Fire Protection	On-site Sewage Systems	
Description of designer's work			
D. Declaration of Designer			
<p>I _____ declare that (choose one as appropriate):</p> <p style="text-align: center;">(print name)</p> <p>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.</p> <p>Individual BCIN: _____</p> <p>Firm BCIN: _____</p> <p>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.</p> <p>Individual BCIN: _____</p> <p>Basis for exemption from registration: _____</p> <p>The design work is exempt from the registration and qualification requirements of the Building Code.</p> <p>Basis for exemption from registration and qualification: _____</p> <p>I certify that:</p> <ol style="list-style-type: none"> 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. <p style="text-align: center;">_____</p> <p style="display: flex; justify-content: space-between;"> Date Signature of Designer </p>			

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 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 information (where answer 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 (where answer to section B is "Yes")			
Name of qualified supervisor(s)		Building Code Identification Number (BCIN)	
E. Declaration of Applicant:			
<p>I _____ declare that:</p> <p style="text-align: center;">(print name)</p> <p>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;</p> <p><u>OR</u></p> <p>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.</p> <p>I certify that:</p> <ol style="list-style-type: none"> 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. <p>_____</p> <p style="text-align: center;">Date Signature of applicant</p>			

Property address _____

DESCRIPTION	DWELLING #1	BOATHOUSE	SLEEPING CABIN	FIXTURE UNITS	TOTAL
Bathroom group (toilet, sink, tub/shower)				x 6 =	
Bathtub or shower				x 1.5 =	
Kitchen sink				x 1.5 =	
Dishwasher				x 1 =	
Washing machine				x 1.5 =	
Laundry tub				x 1.5 =	
Bar sink				x 1 =	
Other: _____					
FIXTURE UNITS					
FINISHED FLOOR AREA					
# OF BEDROOMS					

DESIGN FLOW CALCULATION TABLE				
Residential Occupancy			Volume (L)	Flows
Bedroom flow (A)	1 bedroom dwelling		750	
	2 bedroom dwelling		1100	
	3 bedroom dwelling		1600	
	4 bedroom dwelling		2000	
	5 bedroom dwelling		2500	
Extra bedroom flow (B)	Each bedroom over 5, OR*		500	
Living area flow (C)	Floor space for each 10m ² over 200m ² up to 400m ²		100	
	Floor space for each 10m ² over 400m ² up to 600m ²		75	
	Floor space for each 10m ² over 600m ² OR*		50	
Fixture count flow	Each fixture unit over 20 fixture units		50	

Daily Design Sewage Flow, Q = _____ liters/day A + (B or C or D)

TEST HOLES

Sub-surface conditions encountered:

		Applicant's Use		Inspector's Use	
Indicated depth to bedrock, T>50, &/or ground water table (where present)	Depth (m)	Soil type	T Time	Soil Type	T Time
Test holes ready for inspection <input type="checkbox"/> YES <input type="checkbox"/> NO					
Water Supply <input type="checkbox"/> Proposed <input type="checkbox"/> Existing					
<input type="checkbox"/> Lake	<input type="checkbox"/> Drilled Well	<input type="checkbox"/> Dug Well		<input type="checkbox"/> Other specify	

<input type="checkbox"/> Class 2 Greywater Pit		<input type="checkbox"/> Class 3 Cesspool (cannot exceed 1000 liters/day)			
Type of class 1 on site:	<input type="checkbox"/> Privy <input type="checkbox"/> Composting <input type="checkbox"/> Chemical <input type="checkbox"/> Other				
Wall Structure	<input type="checkbox"/> Cement Block <input type="checkbox"/> Rock <input type="checkbox"/> Wood <input type="checkbox"/> Other				
Side wall area	m2	Length	m	Width:	m
				Depth:	m
					Type of cover

CLASS 4: LEACHING BED/ABSORPTION TRENCH					
<input type="checkbox"/> Dug into existing soil <input type="checkbox"/> Imported Soil list type: _____ height: _____					
(Proof of filter material must be provided)					
Length of Tile: _____(m) _____(ft) # of runs of tile: _____					

CLASS 4: FILTER BED (proof of filter material to be provided prior to backfill)					
Effective Area _____(sqm) Contact Area _____(sqm) Loading Rate: _____					
Height Raised: _____ #of runs of tile: _____ Length of tile _____(m) _____(ft)					

CLASS 4: TREATMENT UNIT (attach Building Material Evaluation Committee Report (BMEC))					
Manufacturer & Model: _____ Daily Flow Rate _____(L)					
Primary Tank Size _____(L) Secondary Tank Size _____(L)					

CLASS: HOLDING TANK (audio visual alarm, and a pump out contract required)					
Manufacturer & Model			Size		

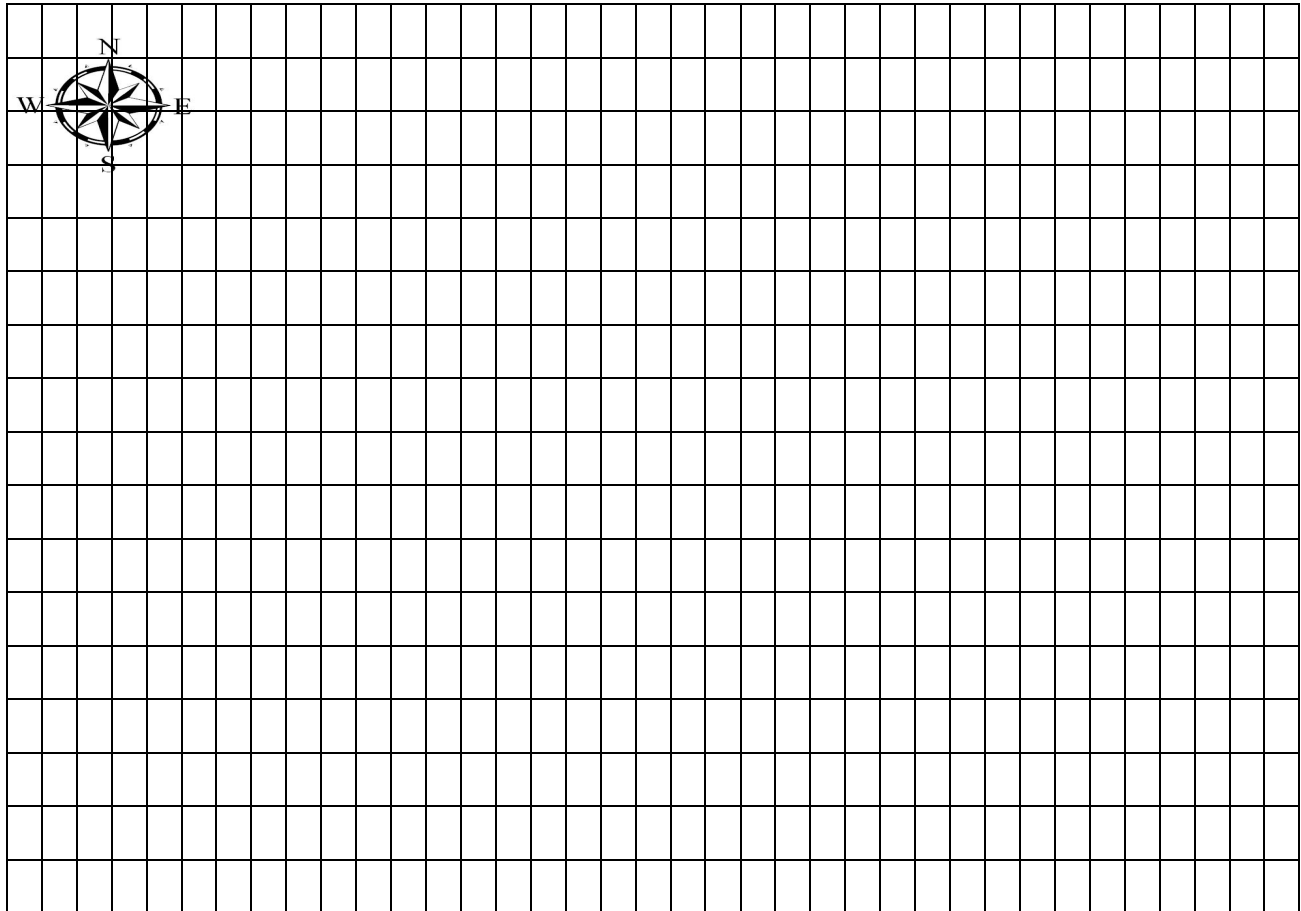
Date Received: _____

SEPTIC SYSTEM LOCATION PLAN

OWNER	INSTALLER
PROPERTY ADDRESS	

Please provide a DIMENSIONED sketch drawing indicating:

1. Outline of property and all dimensions
2. Detailed sewage system diagram, including dimensions of leaching bed, mantle, tank location, pump chamber, etc.
3. Setbacks from existing and proposed buildings, wells (including neighbours) lakes, streams, ponds, water drainage courses.
4. Location of subsurface drainage, tiles, culverts, or other structural features.
5. Existing or proposed driveways, easements, right of ways, drainage patterns.
6. Indicate any areas of disturbed, compacted, imported, or altered soils.



TOS BUILDING PERMIT SEPTIC APPLICATION CHECKLIST					
NOTE: * = If Applicable	SEPTIC				
Application Form: A separate form required for each proposed structure, septic and/or demolition	<input checked="" type="checkbox"/>				
Schedule 1: Third page of application form	<input checked="" type="checkbox"/>				
Site Plan: Interior projects not affecting the external property require an Internal Floor Plan as opposed to Site Plan	<input checked="" type="checkbox"/>				
Construction Drawings: 1 paper copy printed to scale/legible reading size	<input checked="" type="checkbox"/>				
Digital Construction Drawings emailed to building@severn.ca	<input checked="" type="checkbox"/>				
Letter of Authorization: Required for any applicant who is not the project's property owner	<input checked="" type="checkbox"/> *				
Sewage System Design Specifications	<input checked="" type="checkbox"/>				
Sewage System Plan View	<input checked="" type="checkbox"/>				
Schedule Two: Fourth page of application	<input checked="" type="checkbox"/>				
Other Applicable Law: Ministry of Transportation Permit or Approval Proof	<input checked="" type="checkbox"/> *				
Other Applicable Law: Ministry of Natural Resources & Forestry or Trent Severn Waterway for Shoreline / In Water Works	<input checked="" type="checkbox"/> *				

Note: This is a guide only. Additional information, materials or submissions may be required for other permit types such as Change of Use, Commercial, Industrial, Institutional, Multi-Residential, etc. and/or situations which trigger additional provisions listed under 'Other Applicable Law'

