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

		For us	e by F	Principa	I Authority			
Application number:				Permit r	number (if differe	ent):		
Date received:				Roll nur	nber:			
Application submitted to:	(Name of municipal	VNSHIP ity, upper-ti	POF er muni	SABLE	ES-SPANISH ard of health or co	I RIVE nservatio	ERS n authority)	
A. Project information								
Building number, street n	ame						Unit number	Lot/con.
Municipality		Postal o	code		Plan number/o	ther des	cription	
Project value est. \$		·			Area of work (n	n ²)		
B. Purpose of applic	cation				I			
New constructio				Altera	ation/repair	[Demolition	Conditional Permit
Proposed use of building			Curre	ent use of	building			
Description of proposed								
C. Applicant	Applicant is:	Owner			Authorized			
Last name		First na	me		Corporation or	partners	ship	
Street address							Unit number	Lot/con.
Municipality		Postal o	code		Province		E-mail	•
Telephone number ()	number Fax ()			Cell number ()				
D. Owner (if differen	t from applicant)	•						
Last name		First na	me		Corporation or	partners	ship	
Street address		1			1		Unit number	Lot/con.
Municipality		Postal o	code		Province		E-mail	-1
Telephone number ()		Fax ())		1		Cell number ()	

Application for a Permit to Construct or Demolish – Effective January 1, 2014

E. Builder (optional)						
Last name	First name	Corporation or partner	ship (if applicable)		
			1			
Street address			Unit number	Lot/co	on.	
Municipality	Postal code	Province	E-mail			
Municipality	i ustal code	TTOVINCE				
Telephone number	Fax		Cell number			
()	()		()			
F. Tarion Warranty Corporation (Onta	rio New Home Warra	anty Program)				
i. Is proposed construction for a new ho Plan Act? If no, go to section G.	me as defined in the Or	ntario New Home Warrantie	es	Yes	No	
ii. Is registration required under the Ont	ario New Home Warrant	ties Plan Act?		Yes	No	
iii. If yes to (ii) provide registration numb	er(s):					
G. Required Schedules						
i) Attach Schedule 1 for each individual who r	eviews and takes respon	nsibility for design activities	5.			
ii) Attach Schedule 2 where application is to co	instruct on-site, install or	r 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.						
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>						
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						
1(rrist seme)				declare th	nat:	
(print name)						
 The information contained in this app documentation is true to the best of m If the owner is a corporation or partne 	iy knowledge.			other attac	ched	

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	1		
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 Decign extinities undertaken kurt		ntified in Castien D. ID.				
C. Design activities undertaken by i Division C]		-	liding Code Tal	DIE 3.5.2.1. OF		
House		– House	Building S			
Small Buildings		g Services	Plumbing			
Large Buildings		on, Lighting and Power	Plumbing	 All Buildings 		
Complex Buildings Description of designer's work	Fire Pro	otection	On-site Se	ewage Systems		
D. Declaration of Designer						
D. Declaration of Designer			alara that (abaaa)			
print name	I declare that (choose one as appropriate):					
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 s	chedule is true	to the best of my knowledge.				
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.
- 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

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 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) 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 Lot/con. Municipality Postal code Province E-mail Telephone number Fax Cell number 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:	A. Project Information						
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)	Building number, street name			Unit number	Lot/con.		
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") BCIN 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 information (where answer to section B is "Yes") Name of qualified supervisor information (where answer to section B is "Yes") Name of qualified supervisor(s) Building Code Identification Number (BCIN) E. Declaration of Applicant:	Municipality	Aunicipality Postal code Plan number/ other desc					
emptying sewage systems, in accordance with Building Code Article 3.3.1.1, Division C? Installer unknown at time of application (Continue to Section E) Yes (Continue to Section C) No (Continue to Section E) Installer unknown at time of application (Continue to Section E) Registered installer information (where answer to B is "Yes") Name BCIN Name BCIN Street address Unit number Municipality Postal code Province E-mail Telephone number Fax Cell number () 0 Qualified supervisor information (where answer to section B is "Yes") Name of qualified supervisor(s) Building Code Identification Number (BCIN) E. Declaration of Applicant:	B. Sewage system installer		•				
Arrow application (Continue to Section E) 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:	Is the installer of the sewage system enga emptying sewage systems, in accordance	with Building Co	de Article 3.3.1.1, Division (C?			
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:	Yes (Continue to Section C)	No (0	Continue to Section E)				
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) R	C. Registered installer information	n (where answ	ver to B is "Yes")				
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) Name of qualified supervisor(s) Building Code Identification Number (BCIN) E. Declaration of Applicant:				BCIN			
Telephone number Fax Cell number () Call filed supervisor information (where answer to section B is "Yes") Name of qualified supervisor(s) Building Code Identification Number (BCIN) E. Declaration of Applicant: declare that: (print name) I declare that: 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 construct the sewage system, and am submitting a new Schedule 2, now that the installer is known; OR 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 are 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.	Street address			Unit number	Lot/con.		
(I) (I) (I) 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: I	Municipality	Postal code	Province	E-mail			
Name of qualified supervisor(s) Building Code Identification Number (BCIN) E. Declaration of Applicant:	Telephone number	elephone number		Cell number			
E. Declaration of Applicant:	D. Qualified supervisor information	on (where answ	wer to section B is "Yes	;")			
E. Declaration of Applicant:	Name of qualified supervisor(s)		Building Code Identification	n Number (BCIN)			
Image:			Ū				
Image:							
Image:							
 (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: The information contained in this schedule is true to the best of my knowledge. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership. 	E. Declaration of Applicant:						
 (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: The information contained in this schedule is true to the best of my knowledge. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership. 							
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 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: The information contained in this schedule is true to the best of my knowledge. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership. 				ler is unknown at tim	e of application, I shall		
 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. 	OR						
 The information contained in this schedule is true to the best of my knowledge. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership. 	I am the holder of the permit to construct the sewage system, and am submitting a new Schedule 2, now that the installer is						
2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.	I certify that:						
	1. The information contained in this	schedule is true	to the best of my knowledge	Э.			
Date Signature of applicant	2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.						
	Date Signature of applicant						

Energy Efficiency Design Summary

(Part 9 Residential)

This form is used to summarize the energy efficiency design of the project. Information on completing this form is on the reverse

For use by Principal Authority				
Application No:	Model/Certification Number			

A. Project Information

Building number, street name			Unit number	Lot/Con
Municipality	Postal code	Reg. Plan number / other descripti	ion	
		с ,		
	l.			

B. Compliance Option

SB-12 Prescriptive [SB-12 - 2.1.1.]	Table: Package: A B C D E F G H I J K L M (circle one)
□ SB-12 Performance* [SB-12 - 2.1.2.]	* Attach energy performance calculations using an approved software
□ Energy Star®* [SB-12 - 2.1.3.]	* Attach Builder Option Package form
□ EnerGuide 80® *	* House must be evaluated by NRCan advisor and meet a rating of 80

C. Project Design Conditions

Climatic Zone (SB-1):	Heating Equipment Efficiency	Space Heating Fuel	Source	
□ Zone 1 (< 5000 degree days)	□ ≥ 90% AFUE	🗆 Gas	Propane	Solid Fuel
□ Zone 2 (≥ 5000 degree days)	□ ≥ 78% < 90% AFUE	🗆 Oil	Electric	Earth Energy
Windows+Skylights &Glass Doors		Other Building Conditions		
Gross Wall Area = m ²	% Windows+	ICF Basement	Walkout Basement	Log/Post&Beam
Gross Window+ Area = m ²	70 WINdows	□ ICF Above Grade	Slab-on-ground	

D. Building Specifications [provide values and ratings of the energy efficiency components proposed, or attach Energy Star BOP form]

Building Component	RSI / R values	Building Component	Efficiency Ratings	
Thermal Insulation		Windows & Doors ¹		
Ceiling with Attic Space		Windows/Sliding Glass Doors		
Ceiling without Attic Space		Skylights		
Exposed Floor		Mechanicals		
Walls Above Grade		Space Heating Equip. ²		
Basement Walls		HRV Efficiency (SRE% at 0° C)		
Slab (all >600mm below grade)		DHW Heater (EF)		
Slab (edge only ≤600mm below grade)		NOTES 1. Provide U-Value in W/m ² .K, or ER rating 2. Provide AFUE or indicate if condensing type combined system used		
Slab (all ≤600mm below grade, or heated)				

E. Performance Design Verification [complete applicable sections if SB-12 Performance, Energy Star or EnerGuide80 options used]

SB-12 Performance:						
The annual energy consumption using Subsection 2.1.1. SB-1		_ is	Gj (1 Gj =1000Mj)			
The annual energy consumption of this house as designed is_						
The software used to simulate the annual energy use of the be	The software used to simulate the annual energy use of the building is:					
The building is being designed using an air leakage of	air changes per hour (@50Pa.				
Energy Star. Submit the BOP form with Energy Advisor's certi	fication on completion.					
Energy Star and EnerGuide80: Evaluator/Advisor/Rater Name:	Evaluator/Advisor/Rater Lic	ence #:				

F. Designers [names of designers who are responsible for the building code design and whose plans accompany the permit application]

Architectural	Mechanical

Form authorized by OHBA, OBOA, LMCBO. April 23, 2012