

Application for a Permit to Construct or Demolish

This form is authorized under subsection 8(1.1) of the Building Code Act.

For use by Principal Authority			
Application number: N^o 5304	Permit number (if different):		
Date received:	Roll number: 4351		
Application submitted to: TOWNSHIP OF SEVERN			
(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			
<input type="checkbox"/> New construction		<input type="checkbox"/> Alteration/repair	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition to an existing building		<input type="checkbox"/> Conditional Permit	
Proposed use of building	Current use of building		
Description of proposed work			
PROVIDE 2 SETS OF CONSTRUCTION DRAWINGS			
C. Applicant			
Applicant is: <input type="checkbox"/> Owner or <input type="checkbox"/> Authorized agent of owner		Corporation or partnership	
Last name	First name		
Street address	Unit number		Lot/con.
Municipality	Postal code	Province	
Telephone number () ()	Fax () ()	E-mail	
Cell number () ()		E-mail	
D. Owner (if different from applicant)			
Last name		First name	
Street address		Corporation or partnership	
Municipality	Postal code	Province	
Telephone number () ()	Fax () ()	E-mail	
Cell number () ()		E-mail	
Street address		Unit number	Lot/con.

E. Builder (optional)			
Last name	First name	Corporation or partnership (if applicable)	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	
Telephone number ()	Fax ()	E-mail	
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.		<input type="checkbox"/> Yes	<input type="checkbox"/> No
ii. Is registration required under the <i>Ontario New Home Warranties Plan Act</i> ?		<input type="checkbox"/> Yes	<input type="checkbox"/> 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.	<input type="checkbox"/> Yes	<input type="checkbox"/> 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> .	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
iv) The proposed building, construction or demolition will not contravene any applicable law.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I. Declaration of applicant

I _____ (print name) declare that:

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 conservancy 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.

No 3043 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			
Municipality	Postal code	Province	Unit no. Lot/con.
Telephone number ()	Fax number ()	E-mail	Cell number ()

C. Design activities undertaken by individual identified in Section B. [Building Code Table 3.5.2.1. of Division C]

<input type="checkbox"/> House <input type="checkbox"/> Small Buildings <input type="checkbox"/> Large Buildings <input type="checkbox"/> Complex Buildings	<input type="checkbox"/> HVAC – House <input type="checkbox"/> Building Services <input type="checkbox"/> Detection, Lighting and Power <input type="checkbox"/> Fire Protection	<input type="checkbox"/> Building Structural <input type="checkbox"/> Plumbing – House <input type="checkbox"/> Plumbing – All Buildings <input type="checkbox"/> On-site Sewage Systems
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Description of designer's work

D. Declaration of Designer

I _____ (print name) 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 schedule is true to the best of my knowledge.
2. I have submitted this application with the knowledge and consent of the firm.

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) d) 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 authorization, 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.



TOWNSHIP OF SEVERN

THE CORPORATION OF THE TOWNSHIP OF SEVERN

P.O. Box 159, Orillia, Ontario, L3V 6J3

AUTHORIZATION TO ACT AS AGENT FOR BUILDING/SEPTIC PERMIT(S)

**THIS IS REQUIRED IF THE LEGAL OWNER(S) IS NOT
PRESENT WHEN THE PERMIT IS ISSUED TO THE
CONTRACTOR/AGENT**

I/We _____ (print name(s)), the legal
owner(s) of _____ (site
address) authorize _____ (name)
_____ (construction
company name or relationship) to act as my agent.

Signature (Legal Owner #1) _____ Date

Signature (Legal Owner #2) _____ Date

Signature (Acting Agent/Contractor) _____ Date

(This also applies to all registered owners named on the deed.
If you are not sure, please check your tax bill.)



TOWNSHIP OF SEVERN

SITE PLAN GUIDE

An accurate Site Plan is an important component of most municipal applications; Building Permit, Minor Variance, Consent.

It is important that you provide an accurate and complete Site Plan with your application.

Without the necessary information your application will either be returned as incomplete or delayed.

Site Plans are required to determine compliance with Township By-law and Building Code requirements.

Most of the information required can be obtained from your tax bill, deed, survey, on inspection of your property and from the Simcoe County web page (www.county.simcoe.on.ca).

The Site Plan must be to scale, accurate, orderly and legible.

Required Information:

- Lot dimensions
 - Location of buildings (existing and proposed)
 - Size of building
 - Building setbacks (the distance a structure is from all lot lines)
 - Septic location
 - Natural features; streams, rock, wooded areas steep slopes
 - North Arrow
 - Proposed changes to the existing grade
- (see ***the attached sample sketch for reference***)

In some circumstances it may be necessary or required that you hire a professional to prepare the necessary Site Plan. There are many options available for you to obtain a professional site plan from Planning, Engineering or Survey firms.

**Township of Severn (705) 325-2315
Building Inspector Extension #'s 228, 229, 243
Planning & Zoning Extension # 238**

