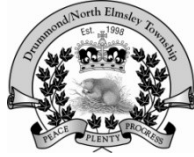


# **ALL AREAS OF PERMIT APPLICATION MUST BE COMPLETED PRIOR TO PERMIT ISSUANCE**

Plans must be submitted by a qualified and/or Registered Designer with a BCIN number issued by the Ministry of Housing unless the building is exempt.

**PLEASE NOTE THAT ALL FEES MUST BE PAID IN FULL &  
*SEPTIC PERMITS* MUST BE SUBMITTED TO THE TOWNSHIP  
PRIOR TO PERMIT ISSUING AND COMMENCEMENT OF ANY  
CONSTRUCTION OR INSTALLATION**





## Township of Drummond/North Elmsley

310 Port Elmsley Road  
RR #5, Perth, Ontario K7H 3C7  
cbo@dnetownship.ca

Office 613-267-6500  
Fax 613-267-2083

### Application for a Permit to Construct or Demolish

This form is authorized under the Building Code Sentence 2.4.1.1A.(2).

#### 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 <sup>2</sup> )		

#### B. 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 ( )	

#### C. 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 ( )	

#### D. 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 ( )	

<b>E. Purpose of application</b>		
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition to an existing building	<input type="checkbox"/> Alteration/repair
<input type="checkbox"/> Demolition	<input type="checkbox"/> Conditional Permit	
Proposed use of building	Current use of building	
Description of proposed work		
<b>F. Tarion Warranty Corporation (Ontario New Home Warranty Program)</b>		
<ul style="list-style-type: none"> <li>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.</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<ul style="list-style-type: none"> <li>Is registration required under the <i>Ontario New Home Warranties Plan Act</i>?</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<ul style="list-style-type: none"> <li>If yes to (ii) provide registration number(s): _____</li> </ul>		
<b>G. Required Schedules</b>		
i. Attach Schedule 1 for each individual who reviews and takes responsibility for design activities. ii. Attach Schedule 2 (Health Unit Permit) where application is to construct on-site, install or repair a sewage system.		
<b>H. Completeness and compliance with applicable law</b>		
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 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
	<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
<b>I. Declaration of applicant</b>		
I _____ certify 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. I have authority to bind the corporation or partnership (if applicable).		
_____	_____	
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.



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check box if Plans are submitted.

if Construction Plans are not submitted complete this following form giving applicable

## CONSTRUCTION DETAILS

1. Construction Type:

- Frame                       Protected Frame             Veneer             Masonry
- Reinforced Concrete       Steel                       Other

2. Soil Type:

- Rock       Clay                       Loam       Other

Are special foundations required?     Yes       No

3. Foundation: Wall Thickness \_\_\_\_\_

Type:  Poured  Block  Other (specify) \_\_\_\_\_

4. Footings: Size \_\_\_\_\_

5. Floor: Load \_\_\_\_\_

6. Water:  Well  Other (specify) \_\_\_\_\_

7. Heating:  Gas  Oil  Electric  Other (specify) \_\_\_\_\_

8. Ventilation:  Required Ventilation Summary has been Submitted – attached; or  N/A

9. Please indicate the number of new bedrooms and/or water fixtures proposed.

\_\_\_\_\_ New bedrooms

\_\_\_\_\_ Water fixtures

10. Septic Approval  Approval Obtained (See submitted copy of approval)

11. CSA or other Approval No. on Fuel Burning Application: \_\_\_\_\_

12. Chimney  Existing  New

CSA or other Approval No. on Fuel Burning Appliance: \_\_\_\_\_

**For New Construction Only:**

13. Parking:

Number of (outdoor) parking spaces: \_\_\_\_\_

Distance from parking spaces/area to lot lines (viewed from road)

Left Side Yd \_\_\_\_\_ ft.

Right Side Yd \_\_\_\_\_ ft.

Rear Yd \_\_\_\_\_ ft.

Front Yd \_\_\_\_\_ ft.

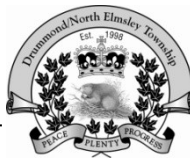
N/A (no new residential dwelling)

14. Access:

Distance from edges of driveway to lot lines

Left Side \_\_\_\_\_ ft. Right Side \_\_\_\_\_ ft.;  N/A (no new residential dwelling)

Entrance approval  Received (copy enclosed)  Pending



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**IMPORTANT: If Site Plan is not included complete this form.....**

### SITE SKETCH/PLAN

1. Dimensions of:  
Proposed Structure: Length\_\_\_\_\_, Width\_\_\_\_\_, Height\_\_\_\_\_, Area Sq. Ft. \_\_\_\_\_  
Deck: Length\_\_\_\_\_, Width\_\_\_\_\_, Height\_\_\_\_\_,  N/A
2. Setbacks From Proposed Structure to Lot Lines:
3. Left Side Yd:\_\_\_\_\_ft., Right Side Yd:\_\_\_\_\_ft., Rear Yd:\_\_\_\_\_ft., Front Yd: \_\_\_\_\_
4. Lot Dimensions:  
Lot Area:\_\_\_\_\_acres ±; Lot Size\_\_\_\_\_ft. x\_\_\_\_\_ft. ±
5. Is this a Corner Lot?  YES  NO
6. Has this property been designated under the Ontario Heritage Act?  YES  NO

**\*\*Include on site sketch for existing and proposed structures, (as appropriate)\*\*:**

- |                  |   |   |
|------------------|---|---|
| 1) Distances to: | <input type="checkbox"/> all lot lines              | 2) <input type="checkbox"/> road location     |
|                  | <input type="checkbox"/> septic (tank and tile bed) | 3) <input type="checkbox"/> number of storeys |
|                  | <input type="checkbox"/> well                       | 4) <input type="checkbox"/> dimensions        |
|                  |   | 5) <input type="checkbox"/> area (sq. ft.)    |

**For New Residential, Addition, or Renovation complete the next three pages.:**