

APPLICATION FOR A BUILDING/DEVELOPMENT PERMIT

LEGAL PROPERTY OWNER:

Name:		Company :	
Mailing Address:	Civic #:	Street Name:	Unit / Apt.:
City/Town/Village:		Province:	Postal Code:
Home #:		Office #:	Cell #:

BUILDER: (Same as Owner)

Name:		Company :	
Civic #	Street Name:		Unit/Apt.
City/Town/Village:		Province:	Postal Code:
Home #:		Office #:	Cell #:

JOB SITE DETAILS: COUNTY PARISH

PID:	Subdivision Name:		
Lot #:	Civic #:	Street Name:	City/Town/Village:

TYPE OF CONSTRUCTION:

<input type="checkbox"/> House Single Family	<input type="checkbox"/> Two Unit	<input type="checkbox"/> Modular	<input type="checkbox"/> Addition to existing Structure	<input type="checkbox"/> Alteration/repair
<input type="checkbox"/> House with attached garage				
<input type="checkbox"/> Locate Mini-home / Mobile	<input type="checkbox"/> Detached Garage	<input type="checkbox"/> Commercial	<input type="checkbox"/> Shed / Baby Barn	Storage <input type="checkbox"/> Demolition <input type="checkbox"/>
<input type="checkbox"/> Project Description				

STRUCTURE DETAILS:

Size/Dimension of Structure: _____(FT) x _____(FT)	Number of Storey's 1 <input type="checkbox"/> 1.5 <input type="checkbox"/> 2 <input type="checkbox"/> 3+ <input type="checkbox"/>
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Plans Attached	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Engineered Plans Attached	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Construction Details on the Back
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PLUMBING / ELECTRICAL:

Plumbing Company:	Contact:	Contact #:
Electrical Company:	Contact:	Contact #:
<input type="checkbox"/> On-Site Septic System Approval (Please attach) Building Permits will not be issued until written notification that septic system approval has been granted by Department of Health.		

CONSTRUCTION TIMELINE / COST:

Proposed start date:	Expected completion date:	Estimate cost of construction:
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The applicant hereby agrees:

- [a] To comply with all relevant By-laws
- [b] To contact the Regional Service Commission
 - To give notice to the Building Inspector (48 hours) prior to the start of work
 - At the designated times stated on the Building Permit
- [c] That a Building Permit granted under the terms of this application is automatically canceled if the applicant fails to conform with any By-laws relevant to this application or deviates from the terms of this application.
- [d] That the Building Permit issued under the terms of this application shall be used for no other work. Any extra work requires another permit.
- [e] Neither the issuance of this building permit nor the approval of plans or specifications, shall relieve the owner from full compliance with the National Building Code, and applicable Provincial Regulations and By-laws.

Signature of Applicant:	Date:
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The Regional Service Commission will not accept responsibility for any damages caused to structures erected in areas subject to flooding, solution collapse or other damages resulting from an act of nature.

OFFICE USE ONLY: (Estimated Cost of construction x \$5.00 / \$ 1000.00) for building permits only

Fee: \$ 25+(____)= \$ _____ \$ 25 for development permit	<input type="checkbox"/> DEBIT <input type="checkbox"/> VISA <input type="checkbox"/> M/C <input type="checkbox"/> CASH <input type="checkbox"/> CHEQUE # _____	Received by:	Receipt #
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DEVELOPMENT OFFICER REVIEW: (Name of Zone / Rural Plan / Basic Planning Statement)

Zoning <input type="checkbox"/> NO <input type="checkbox"/> YES	Zone/RP/BPS		
Permitted use <input type="checkbox"/> NO <input type="checkbox"/> YES	Comments		
Reviewed by:	Date reviewed:	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED (see attached)

BUILDING INSPECTOR REVIEW:

Reviewed/Issued by:	Date issued:	Permit #:
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