



# BUILDING PERMIT APPLICATION

## WHAT ARE YOU APPLYING FOR?

- NEW HOUSE
- NEW AUXILIARY BUILDING
- ADDITION & ALTERATION
- RETAINING WALL
- FOUNDATION FOR MOBILE OR MOVED IN BUILDING
- DEMOLITION
- TENANT IMPROVEMENTS
- POOL
- PLUMBING FIXTURES
- CHANGE OF USE

DESCRIPTION OF CONSTRUCTION: \_\_\_\_\_

\_\_\_\_\_

Civic Address of Construction: \_\_\_\_\_

Legal Description: Lot \_\_\_\_\_ Block \_\_\_\_\_ D.L. \_\_\_\_\_ Plan Number \_\_\_\_\_

Owner: \_\_\_\_\_

Owners Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Value of Construction (approximate): \$ \_\_\_\_\_

The applicant acknowledges that the application date is the date as of which 1) documentation required under Sunshine Coast Regional District Building Bylaw 535 has been submitted and 2) the NON REFUNDABLE application fee has been paid. The balance of the building permit fee is payable when the permit is picked up. It is the responsibility of the applicant to ensure that the information provided in this application is accurate and complete. This application is not considered to be a permit and does not authorise the commencement of work.

**THIS APPLICATION BECOMES VOID IF A BUILDING PERMIT IS NOT OBTAINED WITHIN 180 DAYS OF THE DATE OF THE APPLICATION**

Owner or Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Authorization for Title Search and related document retrieval: \_\_\_\_\_

**NOTES:**

\_\_\_\_\_

<b>FOR OFFICE USE ONLY:</b>	
<input type="checkbox"/> PLANNER _____	
<input type="checkbox"/> SITE PLAN _____	
<input type="checkbox"/> SCHD E _____	
<input type="checkbox"/> HEALTH _____	
<input type="checkbox"/> HPO _____	
<input type="checkbox"/> B1/B2 _____	
<input type="checkbox"/> POTABLE WATER _____	
<input type="checkbox"/> APP FEE PAID: DATE: _____ RECEIPT # _____ AMNT \$ _____	

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