



Building Division Permit Application

BP _____

PLEASE PRINT AND COMPLETE THIS FORM CAREFULLY.
INSUFFICIENT INFORMATION WILL DELAY THE PROCESSING OF THIS APPLICATION.

LEGAL DESCRIPTION:

Lot	Block	District Lot	Plan	PID	Folio
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CIVIC ADDRESS (if already assigned):

House Number	Unit	Street
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OWNER Primary contact

Name(s):		
Mailing Address:	City, Province	Postal Code
Tel:	Cell	Email:

AGENT Primary contact Agents letter completed

Name(s):		
Mailing Address:	City, Province	Postal Code
Tel:	Cell	Email:

CONSTRUCTOR Primary contact

Name(s):		
Company name:		
Mailing Address:	City, Province	Postal Code
Tel:	Cell	Email:

PROPOSED CONSTRUCTION DETAILS:

New <input type="checkbox"/>	Addition <input type="checkbox"/>	Alteration <input type="checkbox"/>	Repair <input type="checkbox"/>	Demolition <input type="checkbox"/>	Move <input type="checkbox"/>
Dwelling <input type="checkbox"/>	Auxiliary Dwelling <input type="checkbox"/>	Manufactured Home <input type="checkbox"/>	Mobile Home <input type="checkbox"/>	Auxiliary Building <input type="checkbox"/>	Agricultural Building <input type="checkbox"/>
Sprinklers <input type="checkbox"/>	Commercial Building <input type="checkbox"/>	Tenant Improvement <input type="checkbox"/>	Change Of Use <input type="checkbox"/>	Completion Of Expired Permit <input type="checkbox"/>	Other <input type="checkbox"/>

Describe the scope of work:

Number of stories:	Estimated value of construction:	Type of Heating system:
Number of bedrooms:	Existing:	New:
		Total:



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HAVE YOU PROVIDED THE FOLLOWING?

Certificate of Title (dated within 30 days of application, including copies of registered covenants, easements and right of ways) <i>(C of T can be obtained by SCRD for a fee of \$20.00, covenants, easements and r/w's for a fee of \$50.00 each)</i>				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Sewerage Filing or registered practitioner's (ROWP) report, as applicable.				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Highways access approval (for properties accessing a numbered highway and all commercial properties)				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Owner's Acknowledgement of Responsibility and Undertakings form (Schedule E)				Yes <input type="checkbox"/>	No <input type="checkbox"/>
BC Building Code Letters of Assurance complete with proof of liability insurance from Professional Engineer(s). (Schedule B)				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Residential builder "BC Housing Registration Form" or owner builder "New Home Registration Form" (for new dwellings)				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Construction plans – 2 sets of printed architectural (sealed by a P. Eng. if applicable, or 2 separate sealed copies), and 1 digital PDF copy of architectural.				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Site Plan, complete with all buildings, measurements & setbacks				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Manufacturer's specification sheet, for mobile or modular home				Yes <input type="checkbox"/>	No <input type="checkbox"/>
If mobile or modular home: Provide #	CSA Z240	CSA A277	CSA Z241		

IMPORTANT APPLICATION QUESTIONS:

Is the property in a water service area? If so, which area: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the property in close proximity to: the sea, a lake, river, stream, creek, cliff, bank, ravine, or escarpment? If so, what specifically:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there any existing structures on the property? (If yes, must be indicated on site drawing)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does or will your home contain any wood burning appliances?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
What type of heating and ventilation system is installed or proposed for your house? _____		
Has there been a demolition, addition, alteration or repair of a structure built prior to 1990?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Property Owner / Authorized Agent Signature Required →		Date:
Date Rec'd:	Rec'd By:	