



PLEASE NOTE

The length of time to process/obtain a building permit is approximately **three (3) weeks minimum.**

We can assure you we will do everything possible to expedite your application as quickly as possible. In the event that it is completed sooner, we will call you immediately.

Your co-operation is appreciated.

Lynn Balfour
Chief Building Official

☆ 37 APPLICATION DATE: _____

38 CONSTRUCTION COMPLETED: _____

39 DATE OCCUPIED: _____

☆ 40 PLUMBER'S NAME: _____

41 PLUMBING LICENSE REQ'D: YES NO

42 PLUMBING RECEIPT REQ'D: YES NO

☆ 43 ELECTRICIANS NAME: _____

44 ELECT. LICENSE REQ'D: YES NO

☆ 45 NUMBER OF STORIES: _____

46 PLAN NUMBER: R.P. 2R- _____

☆ 47 CORNER LOT: YES NO

☆ 48 FRONT PROPERTY ABUTS: _____

☆ 49 FOUNDATIONS: _____

☆ 50 FOOTINGS: _____

☆ 51 HEATING: _____

☆ 52 SIZE OF ELECTRICAL SERVICE: _____

53 GENERAL INFORMATION: _____

54 BUILDING WORK ORDERS: YES NO

55 PROPERTY STDS. ORDERS: YES NO

56 POOL CERTIFICATE: YES NO

☆ 57 RIGHT-OF-WAY: YES NO DETAILS _____

☆ 58 EASEMENTS: YES NO DETAILS _____

☆ 59 ONTARIO NEW HOME WARRANTY NO. _____

☆ 60 ARCHITECT NAME: _____

☆ 61 STREET ADDRESS: _____

☆ 62 CITY/PROVINCE/POSTAL CODE: _____

☆ 63 PHONE NUMBER: () _____

64 INTENDED USE CODE: _____

65 NUMBER OF DWELLING UNITS: _____

66 FEE CODE: _____

DECLARATION:

I, the undersigned _____, am the authorized owner/agent or owner named in the above application and I certify the truth of all the statements or representations contained therein. I, understand that the issuance of a permit shall not be deemed a waiver of any of the provisions of any Municipal By-Laws or requirements of the Building Code Act or regulation made thereunder, notwithstanding anything included in or omitted from the plans or other material filed in support of or in connection with the above application.

I, further acknowledge that in the event the permit is revoked for any cause or irregularity or nonconformity with Municipal By-Laws or requirements of the Building Code Act, or regulations made thereunder, that I have hereby waived and finally released any claim whatsoever against the Municipal Corporation, its Officers, Employees and Agents arising therefrom.

DATE SUBMITTED _____

SIGNATURE OF OWNER/AGENT

SIGNATURE OF EMPLOYEE (WITNESS)

NOTE: If you are signing on behalf of a Corporation, kindly provide the exact Corporate name and your position within the Corporation.

FOR OFFICE USE ONLY:

FOR OFFICE USE ONLY:

TYPE OF PERMIT:

RESIDENTIAL

FARM

INDUSTRIAL

INSTITUTIONAL

COMMERCIAL

DEMOLITION

ALTERATIONS

(Garage, Pool, Shed, Addition & Plumbing)

GROUP: _____

DIVISION: _____

HAVE THE APPLICANTS' OBTAINED?



	<u>Required</u>	<u>Received</u>	<u>Approved</u>	<u>N/A</u>
Site Plan/Eng.Site Plan (2-Site Plans)	_____	_____	_____	_____
Planning Department	_____	_____	_____	_____
Construction Plans (2 Sets) (Including Plumbing Print)	_____	_____	_____	_____
Septic System	_____	_____	_____	_____
Heat Loss Calculations (2 Sets)	_____	_____	_____	_____
Public Works Department	_____	_____	_____	_____
Entranceways	_____	_____	_____	_____
Water	_____	_____	_____	_____
Storm Water	_____	_____	_____	_____
Sanitary Sewer	_____	_____	_____	_____
Brant County Roads	_____	_____	_____	_____
Brant County Forestry Officer	_____	_____	_____	_____
Ministry of Transportation, Ontario	_____	_____	_____	_____
Fire Department	_____	_____	_____	_____
Grand River Conservation Authority	_____	_____	_____	_____
O.M.A.F.	_____	_____	_____	_____
Ministry of the Environment (Impact Statement or Waiver)	_____	_____	_____	_____
Ministry of Labour	_____	_____	_____	_____
Welding Certificate	_____	_____	_____	_____

COMMENTS:

PERMIT COMPLETED BY:

(STAFF MEMBER)

ENTERED

APPROVED

PRINTED

DATE

DATE

DATE

INITIALS

INITIALS

INITIALS