

Building permits are required for any solar panel installations that are having an aggregate face area of 5 square metres (54 square feet) or greater that is mounted to a building or structure or designed to provide hot water or designed to provide primary or supplementary heating.

Existing buildings must be evaluated for the extra loading the solar panels apply to the roof assembly. Solar panels may add dead loads to the structure and can also cause extra wind uplift and live loads (snow accumulation due to placement of panels). Transfer of loads through the panel mounting systems may cause a relocation of where and how the loads are applied to the roof assembly (uniform and/or point loads). If insufficient capacity is identified systems would have to be strengthened.

Required approvals from other agencies:

In many instances before a building permit application can be processed and a permit issued, there are other approvals from other agencies that are required. These approvals are not administered by Building Division. Please ensure all required approvals are complete using the applicable law checklist prior to applying for a building permit. These approvals are required as part of a complete building permit application package.

This checklist provides a summary of the Building Permit submission requirements for solar panels. This checklist has been developed for convenience purposes only. The property owner is responsible for ensuring compliance with all County of Brant by-laws, other applicable laws and the Ontario Building Code.

Permit applications to be filled out and signed

Authorization form (if applicable)

Commitment to General Review form completed by the owner and professional engineer

Complete set of construction drawings, drawn to scale including;

- **Roof Plan** showing the location of the proposed solar collectors including dimensions and the number of panels and the type of construction used for the existing roof (i.e. engineered trusses at 24" o.c. or list size and spacing of roof rafters / joists)
- **Engineering details** for the solar collectors and their connection to the existing roof and confirmation from a structural engineer that the impact of the installation of the collector and associated equipment will not adversely affect the existing roof structure.
- Solar panel manufacturer specifications
- Pre-manufactured mounting rail system manufacture specifications
- Supplementary construction if upgrades are required (by Professional Engineer)
 - Identify size and location of any supports or bracing to be provided to existing systems.
 - Prescribe size and location of all new supports
 - Confirm all loads are sufficiently transferred to footings

The design of solar collector systems and the on-site field review of their installation shall be undertaken by a professional engineer licensed in the Province of Ontario.

Next steps:

- Submit the complete permit application and supporting documents to the Building Division either electronically by emailing building@brant.ca or hard copies can be dropped off at the Pairs Customer Service Office
- The application is reviewed for completeness, compliance with the zoning by-law, applicable laws, lot grading approval and building code. Application review comments are provided during review to identify any outstanding requirements and to summarize permit fees. Incomplete permit applications may delay permit processing time.
- The permit is issued when all review is complete, and all fees are paid.
- Once the permit is issued, construction begins, and inspections are scheduled. Building inspectors review major phases of construction until occupancy and/or final is complete.

Need help? If you have any questions, please feel free to contact us at any time and we will assist you through the process! Telephone 519.44BRANT or email us at building@brant.ca

Application for a Permit to Construct or Demolish

This form is authorized under subsection 8(1.1) of the *Building Code Act, 1992*

| 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 ²) | | |
| B. Purpose of application | | | | |
| New construction | Addition to an existing building | Alteration/repair | Demolition | Conditional Permit |
| Proposed use of building | | Current use of building | | |
| Description of proposed work | | | | |
| C. 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 |
| D. 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 |

| E. 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 |
| F. Tarion Warranty Corporation (Ontario New Home Warranty Program) | | | | |
| i. 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. | | | Yes | No |
| ii. Is registration required under the <i>Ontario New Home Warranties Plan Act</i> ? | | | Yes | No |
| iii. If yes to (ii) provide registration number(s): _____ | | | | |
| G. Required Schedules | | | | |
| i) Attach Schedule 1 for each individual who reviews and takes responsibility for design activities. | | | | |
| ii) Attach Schedule 2 where application is to construct on-site, install or repair a sewage system. | | | | |
| H. Completeness and compliance with applicable law | | | | |
| 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, and all 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. | | | Yes | 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> . | | | Yes | 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. | | | Yes | No |
| iv) The proposed building, construction or demolition will not contravene any applicable law. | | | Yes | No |
| I. Declaration of applicant | | | | |
| I _____ declare 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. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership. | | | | |
| _____ | | _____ | | |
| 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.



Permit Applicant Authorization

This form must be completed for all building permit applications where the applicant is the Owner's Agent

| A. Project Information | | | |
|--|-------------|----------------------------|----------|
| Property Address | | Unit number | Lot/con. |
| Municipality County of Brant | Postal Code | | |
| B. Property Owner(s) | | | |
| Last name | First name | Corporation or partnership | |
| Street address | | Unit number | |
| Municipality | Postal code | Province | E-mail |
| Telephone number | | Cell number | |
| C. Party to be Authorized | | | |
| Last name | First name | Corporation or partnership | |
| Street address | | Unit number | |
| Municipality | Postal code | Province | E-mail |
| Telephone number | | Cell number | |
| D. Declaration of Property Owner(s) | | | |
| <p>I _____, hereby Name of Property Owner(s) (please print)</p> <p>authorize and appoint the party stated in Section C of this form as my agent for the purposes of the submitted permit application. I understand that all communications and correspondence regarding this application shall be directed to the applicant.</p> <p>_____ Date _____ Signature of Property Owner(s)</p> | | | |

Note:

1. The Ontario Building Code states that "owner includes, in respect of the property on which the construction or demolition will take place, the registered owner, a lessee or mortgagee in possession".

Personal information contained in this form 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*.

COMMITMENT TO GENERAL REVIEWS BY ARCHITECT AND ENGINEERS

THIS FORM TO BE COMPLETED BY THE OWNER OR OWNER'S AUTHORIZED AGENT, AND SIGNED BY ALL CONSULTANTS RETAINED FOR GENERAL REVIEWS

Part A - Owner's Undertaking

Permit Application No.

Project Description:

Address of Project:

Municipality:

WHEREAS the Ontario Building Code requires that the project described above be designed and reviewed during construction by an architect, professional engineer or both that are licensed to practice in Ontario;

NOW THEREFORE the Owner, being the person who intends to construct or have the building constructed hereby warrants that:

1. The undersigned architect and/or professional engineers have been retained to provide general reviews of the construction of the building to determine whether the construction is in general conformity with the plans and other documents that form the basis for the issuance of a building permit, in accordance with the performance standards of the Ontario Association of Architects (OAA) and/or Professional Engineers Ontario (PEO);
2. All general review reports by the architect and/or professional engineers will be forwarded promptly to the Chief Building Official, and
3. Should any retained architect or professional engineer cease to provide general reviews for any reason during construction, the Chief Building Official will be notified in writing immediately, and another architect or engineer will be appointed so that general review continues without interruption during construction.

The undersigned hereby certifies that he/she has read and agrees to the above

Name of Owner:

Date:

Address of Owner:

Telephone:

Signature of Owner:

Print Name:

Fax:

(or officer of corporation)

Coordinator of the work of all consultants:

Telephone:

Address:

Fax:

Part B - Consultants

The undersigned architect and/or professional engineer(s) hereby certify that they have been retained to provide general reviews of the parts of construction of the building indicated, to determine whether the construction is in general conformity with the plans and other documents that form the basis for the issuance of a building permit, in accordance with the performance standards of the OAA and/or PEO.

SHADED PORTION TO BE COMPLETED BY CONSULTANTS

| | | | | | | |
|--|-------------------------------------|-------------------------------------|-------------------------------------|--|---|--|
| <input type="checkbox"/> ARCHITECTURAL | <input type="checkbox"/> STRUCTURAL | <input type="checkbox"/> MECHANICAL | <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> SITE SERVICES | <input type="checkbox"/> OTHER (SPECIFY): | |
| Consultant Name: | Signature: | Print Name: | Date: | | | |
| Telephone: | Fax: | Address: | | | | |

| | | | | | | |
|--|-------------------------------------|-------------------------------------|-------------------------------------|--|---|--|
| <input type="checkbox"/> ARCHITECTURAL | <input type="checkbox"/> STRUCTURAL | <input type="checkbox"/> MECHANICAL | <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> SITE SERVICES | <input type="checkbox"/> OTHER (SPECIFY): | |
| Consultant Name: | Signature: | Print Name: | Date: | | | |
| Telephone: | Fax: | Address: | | | | |

| | | | | | | |
|--|-------------------------------------|-------------------------------------|-------------------------------------|--|---|--|
| <input type="checkbox"/> ARCHITECTURAL | <input type="checkbox"/> STRUCTURAL | <input type="checkbox"/> MECHANICAL | <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> SITE SERVICES | <input type="checkbox"/> OTHER (SPECIFY): | |
| Consultant Name: | Signature: | Print Name: | Date: | | | |
| Telephone: | Fax: | Address: | | | | |

| | | | | | | |
|--|-------------------------------------|-------------------------------------|-------------------------------------|--|---|--|
| <input type="checkbox"/> ARCHITECTURAL | <input type="checkbox"/> STRUCTURAL | <input type="checkbox"/> MECHANICAL | <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> SITE SERVICES | <input type="checkbox"/> OTHER (SPECIFY): | |
| Consultant Name: | Signature: | Print Name: | Date: | | | |
| Telephone: | Fax: | Address: | | | | |