

For use by Principal Authority				
Application number:		Permit number (if different):		
Date received:		Roll number:		
<p>Application submitted to: HALDIMAND COUNTY</p> <p>(Name of municipality, upper-tier municipality, board of health or conservation authority)</p>				
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.

Schedule 1: Designer Information

Use one form for each individual who reviews and takes responsibility for design activities with respect to the project.

A. Project Information			
Building number, street name	Unit no.	Lot/con.	
Municipality	Postal code	Plan number/ other description	
B. Individual who reviews and takes responsibility for design activities			
Name	Firm		
Street address	Unit no.	Lot/con.	
Municipality	Postal code	Province	E-mail
Telephone number	Fax number		Cell number
C. Design activities undertaken by individual identified in Section B. [Building Code Table 3.5.2.1. of Division C]			
House	HVAC – House	Building Structural	
Small Buildings	Building Services	Plumbing – House	
Large Buildings	Detection, Lighting and Power	Plumbing – All Buildings	
Complex Buildings	Fire Protection	On-site Sewage Systems	
Description of designer's work			
D. Declaration of Designer			
<p>I _____ declare that (choose one as appropriate):</p> <p style="text-align: center;">(print name)</p> <p>I review and take responsibility for the design work on behalf of a firm registered under subsection 3.2.4. of Division C, of the Building Code. I am qualified, and the firm is registered, in the appropriate classes/categories.</p> <p>Individual BCIN: _____</p> <p>Firm BCIN: _____</p> <p>I review and take responsibility for the design and am qualified in the appropriate category as an "other designer" under subsection 3.2.5. of Division C, of the Building Code.</p> <p>Individual BCIN: _____</p> <p>Basis for exemption from registration: _____</p> <p>The design work is exempt from the registration and qualification requirements of the Building Code.</p> <p>Basis for exemption from registration and qualification: _____</p> <p>I certify that:</p> <ol style="list-style-type: none"> 1. The information contained in this schedule is true to the best of my knowledge. 2. I have submitted this application with the knowledge and consent of the firm. <p style="text-align: center;">_____</p> <p style="display: flex; justify-content: space-between;"> Date Signature of Designer </p>			

NOTE:

1. For the purposes of this form, "individual" means the "person" referred to in Clause 3.2.4.7(1) (c) of Division C, Article 3.2.5.1. of Division C, and all other persons who are exempt from qualification under Subsections 3.2.4. and 3.2.5. of Division C.
2. Schedule 1 is not required to be completed by a holder of a license, temporary license, or a certificate of practice, issued by the Ontario Association of Architects. Schedule 1 is also not required to be completed by a holder of a license to practise, a limited license to practise, or a certificate of authorization, issued by the Association of Professional Engineers of Ontario.



Permit No. _____

Received _____

Receipt # _____

**Supplementary Application Information for
Building Permit**

Required by the CBO pursuant to Section 7(1)(b) Ontario Building Code Act

PROPERTY INFORMATION

Assessment Roll No.: _____ Or Severed From
 Municipal Address: _____
No. Street City/Town

PROJECT INFORMATION

<input type="checkbox"/> Single Family Dwelling	<input type="checkbox"/> New	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Structure
<input type="checkbox"/> Multiple Residential	<input type="checkbox"/> Addition	<input type="checkbox"/> Accessory Building	<input type="checkbox"/> Pool
<input type="checkbox"/> Commercial	<input type="checkbox"/> Alteration/Repair	<input type="checkbox"/> Agricultural	<input type="checkbox"/> Sign
<input type="checkbox"/> Demolition	<input type="checkbox"/> Tent	<input type="checkbox"/> Temporary	
<input type="checkbox"/> Industrial	<input type="checkbox"/> Institutional	<input type="checkbox"/> Heritage Building	No. of Storeys _____
<input type="checkbox"/> Change of Use			No. of Units _____

Proposed Use: _____ Proposed Start Date: _____
 Structure: Floor Area: _____ m² (ft.²) Ceiling Height: _____ m (ft.) Bldg Height: _____ m (ft.²)
 Construction Type: _____ Attached Garage Floor Area: _____ m² (ft.²)
 Heating: _____ Engineered Floors: Yes No Construction Value: _____
 Description of Work: _____ Permit Fee: _____

MUNICIPAL ZONING INFORMATION

Lot: _____ Concession: _____ Plan #: _____

Parcel # _____	Ref. Plan #: _____	Front	Setbacks	
			<small>Proposed</small>	<small>Minimum</small>
_____	_____	m(ft.)	m(ft.)	m(ft.)
Former Mun.: _____	Former Twp.: _____	Rear	m(ft.)	m(ft.)
Lot Size: _____	Frontage: _____	Left	m(ft.)	m(ft.)
Amendment/MV#: _____	Zoning: _____	Right	m(ft.)	m(ft.)
	Corner Lot: _____	Flank	m(ft.)	m(ft.)

Sanitary Sewers: Yes No Municipal Water: Yes No

OWNER'S AUTHORIZATION

APPLICANT CERTIFICATION

To be completed if owner is not the applicant:
 I, _____, the owner of the
Name (Please print)
 subject property, hereby authorize the above-mentioned contractor to act on my behalf with respect to all matters pertaining to the proposed construction. I am aware that neither the granting of a permit, nor the approval of plans nor inspections made by the building official shall in any way exempt me, the Corporation or partnership as the case may be, and understand that are responsible for the contractor acting in my behalf owners from complying with the Ontario Building Code or any other applicable law.
 Signature: _____
 Date: _____

I, _____ the
Name (Please print)
 undersigned so authorized by the owner to act on their behalf agree to comply with the provisions of the Building By-laws & Zoning By-laws of Haldimand County and any amendments thereto. I/We further agree that neither granting of a Permit nor the approval of the plans nor inspections made by the building official shall relieve me/us from full responsibility for carrying out work in accordance with the above-mentioned by-laws or pertinent rules or regulations.
 Signature: _____
 Date: _____

NOTE: Personal information provided on this form is collected pursuant to the Ontario Building Code Act and the Haldimand County Building By-law and will be used for the purpose of reviewing this application and preparation of monthly reports



Application for Plumbing Permit

PROPERTY INFORMATION

Assessment Roll No.: _____ Or Severed From

Municipal Address: _____
No. Street City/Town

Lot #: _____ Conc. #: _____ Plan #: _____ Parcel #: _____

Ref. Plan #: _____ Former Municipality: _____ Former Township: _____

PLUMBING INFORMATION

<input type="checkbox"/> Residential	<input type="checkbox"/> Other	<input type="checkbox"/> Water Closet	<input type="checkbox"/> Lavatory	<input type="checkbox"/> Bathtub
<input type="checkbox"/> Non-Combustible	<input type="checkbox"/> Barrier Free	<input type="checkbox"/> Shower	<input type="checkbox"/> Pressure Pump	<input type="checkbox"/> Hot Water Tank
<input type="checkbox"/> Fire Separations	<input type="checkbox"/> Fire Stop	<input type="checkbox"/> Laundry Tub	<input type="checkbox"/> Clothes Washer	<input type="checkbox"/> Dishwasher
<input type="checkbox"/> New Building	<input type="checkbox"/> Old Building	<input type="checkbox"/> Sink	<input type="checkbox"/> Floor Drain	<input type="checkbox"/> Sump
Flat Fee: <u>\$59.00 (2021)</u>		<input type="checkbox"/> Sewage Ejector	<input type="checkbox"/> Roof Hopper	<input type="checkbox"/> Drinking Fountain
# of Fixtures: _____ x \$9.64 (2021)		<input type="checkbox"/> Interceptor	<input type="checkbox"/> Grease Trap	<input type="checkbox"/> Urinal
Permit Fee: _____		<input type="checkbox"/> Water Softener	<input type="checkbox"/> Backwater Valve	<input type="checkbox"/> Other
				Specify: _____

Description of Work:

OWNER'S AUTHORIZATION

APPLICANT CERTIFICATION

To be completed if owner is not the applicant:

I, _____, the owner of the
Name (Please print)
 subject property, hereby authorize the above-mentioned contractor to act on my behalf with respect to all matters pertaining to the proposed construction. I am aware that neither the granting of a permit, nor the approval of plans nor inspections made by the building official shall in any way exempt me, the Corporation or partnership as the case may be, and understand that are responsible for the contractor acting in my behalf owners from complying with the Ontario Building Code or any other applicable law.

Signature: _____
 Date: _____

I _____ the
Name (Please print)
 undersigned so authorized by the owner to act on their behalf agree to comply with the provisions of the Building By-laws & Zoning By-laws of Haldimand County and any amendments thereto. I/We further agree that neither granting of a Permit nor the approval of the plans nor inspections made by the building official shall relieve me/us from full responsibility for carrying out work in accordance with the above-mentioned by-laws or pertinent rules or regulations.

Signature: _____
 Date: _____

****IMPORTANT****	After permit issuance, please ensure that all required inspections are completed and said permit is finalized. It has been this Division's experience that outstanding building permits could affect future sales and/or mortgaging of a property.
--------------------------	---