



BUILDING PERMIT GUIDELINES INSTITUTIONAL / COMMERCIAL / INDUSTRIAL

Name: _____ Address: _____ Date: _____ Staff Initials: _____

| Description | | Required | Submission Status | Comments | |
|----------------------------|--|-----------------------------------|-------------------|--|---|
| Applicable Law | Zoning Confirmation / Approval / SPA Conservation Authority | ✓ | | | |
| | Ministry of Transportation (MTO) | | | If applicable | |
| | Elgin St. Thomas Health Unit | | | If applicable | |
| | Building Permit Application | ✓ | | | |
| Forms | Schedule 1: Designer Information | Small, Large or Complex Buildings | | If applicable | |
| | | Plumbing - All Buildings | | If applicable | |
| | | Building Services | | If applicable | |
| | | Building Structural | | If applicable | |
| | General Review Commitment Certificate | Architectural | | | Each designing Engineer / architect to comment if required. |
| | | Mechanical | | | |
| | | Structural | | | |
| | | Electrical | | | |
| Plans | Foundation Plan | ✓ | | | |
| | Floor Plan | ✓ | | | |
| | Exterior Elevations | ✓ | | | |
| | Roof Framing Plan | | | If applicable | |
| | Cross Section(s) | ✓ | | | |
| | Plumbing Plan(s) | | | If applicable | |
| | Electrical Plan(s) | | | If applicable | |
| | HVAC Plan(s) | | | If applicable | |
| Engineered Products | Truss Layout & Profiles | | | If applicable | |
| | Floor Layout | | | If applicable | |
| | Beam Specifications | | | If applicable | |
| | Engineered Steel Building Plans | | | If applicable | |
| | ICF - Insulated Concrete Forms CCMC approval & manufacturers details | | | If applicable | |
| Misc | Letter of Agent | | | When application not signed by owner | |
| | Permit Fee | ✓ | | As per Fee by-law Calculated at submission | |

- Be advised that additional information may be required following a full review of your permit application package
- Associated septic application must be approved prior to building permit issuance.

3 COPIES OFF ALL PLANS / DOCUMENTS ARE REQUIRED

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

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

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

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