



Cultivating Growth, Shore to Shore

Building Development Services

315 King Street West

P.O. Box 640 Chatham, Ontario N7M5K8

Tel: (519) 360-1998 Fax: (519) 436-3215

☐ **Lot within Plan of Subdivision**

☐ **Existing In-fill Lot**

Application for a Permit to Construct or Demolish

This form is authorized under subsection 8(1.1) of the Building Code Act.

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			
<input type="checkbox"/> New construction <input type="checkbox"/> Addition to an existing building <input type="checkbox"/> Alteration/repair <input type="checkbox"/> Demolition <input type="checkbox"/> Conditional Permit			
Proposed use of building		Current use of building	
Description of proposed work			
C. Applicant Applicant is: <input type="checkbox"/> Owner or <input type="checkbox"/> 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 Warranties 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.			<input type="checkbox"/> Yes	<input type="checkbox"/> No
ii. Is registration required under the <i>Ontario New Home Warranties Plan Act</i> ?			<input type="checkbox"/> Yes	<input type="checkbox"/> 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 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.			<input type="checkbox"/> Yes	<input type="checkbox"/> 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> .			<input type="checkbox"/> Yes	<input type="checkbox"/> 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.			<input type="checkbox"/> Yes	<input type="checkbox"/> No
iv) The proposed building, construction or demolition will not contravene any applicable law.			<input type="checkbox"/> Yes	<input type="checkbox"/> No
I. Declaration of applicant				
<p>I _____ declare that:</p> <p style="text-align: center;">(print name)</p> <p>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.</p> <p>2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.</p>				
Date		Signature of applicant		

Utility Notification Form

Building Development Services
315 King Street West, P.O. Box 640 Chatham,
Ontario N7M5K8
Tel. (519) 360-1998 Fax: (519) 436-3215

APPLICANT is: ☐ Owner **OR** ☐ Authorized Agent of Owner _____
(Please print)

OWNER (if different from above): _____
(Please print)

(Signature) (Date)

Phone: _____ Fax: _____

LOCATION: (ADDRESS & CITY) _____

PROPOSED DATE OF DEMOLITION: _____

TYPE OF BUILDING TO BE DEMOLISHED: _____

1. The demolition contractor is responsible for ensuring that the building is vacated and all services have been disconnected prior to the commencement of work (gas, water, hydro, etc.)
2. All sewers are to be adequately capped to ensure that deleterious material does not enter the Municipal sewage system when the building being demolished contains a plumbing system. **THE CONTRACTOR IS TO CALL FOR AN INSPECTION** when capping is complete and prior to continuing work.
3. Decommissioning of the septic tank is required, tank shall be pumped and holes put in the bottom to provide drainage, filled with sand or approved material, and the lid shall be crushed. Failure to abandon sewage disposal systems will create a hazard to the health and safety of the homeowner and the public.
4. **CONTRACTOR IS ALSO TO CALL FOR AN INSPECTION** when work is complete to ensure adequate clean-up of the property. The site is to be leveled and clear of all demolition materials.
5. Demolition is to be in accordance with the Occupational Health & Safety Act and Regulations for Construction Projects.
6. The **MINISTRY OF LABOUR** requires property owners to provide an environmental survey if there is a belief of a designated substance on the premise i.e. Asbestos. If a survey is required an environmental firm can do the assessment. The Ministry of Labour will require a Notice of Project. Call 519-256-8277 or 1-800-265-5140 for more information, or refer to the Notice of Project form.

AGENCY	PHONE	EMAIL OR FAX	CONTACT	SIGNATURE	DATE
Bell Canada	519-352-9047	michael.crow@bell.ca 519-352-0879	Mike Crow		
Entegrus Hydro	519-352-6300	projectplanner.sw@entegrus.com	N/A		
Entegrus Water	519-352-6300	customerservice@entegrus.com	N/A		
Hydro One	1-800-957-7756	FBCWoodstock@hydroone.com	Paula		
Enbridge Gas Ltd.	1-877-362-7434	wmschedulingchat@enbridge.com <small>Contact by phone number first to start the process, then forward this form to the above email.</small>	N/A		
Cogeco Cable TV	519-397-2959	fayez.youssef@cogeco.com	Fayez Youssef		
Union Energy/Reliance	1-866-735-4262	crs@reliancecomfort.com	N/A		

In addition to the above notifications, please ensure proper utility locates are obtained.

Also note utility locates obtained by the Ontario One Call # 1(800) 400-2255 **DO NOT** constitute notification for the purpose of this form, please use the numbers listed above. Please note that some utilities do not participate in the Ontario One Call Service.

If no Fax # is supplied - FAX back to the Building Department @ 519-436-3215