



## Section A – General Information

- Project Type(s)**
- Demolition - **Section C**
  - Renovation - **Section D**
  - Tent Permit- **Section E**
  - Addition - **Section F**
  - Conversion/Change of Use - **Section G**
  - New Construction - **Section H**
  - Place/Locate - **Section I**
  - Development Permit - **Section J**
  - Residential Accessory Building - **Section K**
  - Swimming Pool/Fence - **Section L**
  - Deck Only - **Section M**
  - Power Connection - **Section N**

Civic Address: \_\_\_\_\_  Residential  Non-Residential

PID(s): \_\_\_\_\_ Plans Submitted By  Paper  PDF  N/A

Project Description: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Municipal Water  Yes  No  N/A Municipal Sewer  Yes  No  N/A  Work Commenced Without A Permit

Other Building(s) on lot (required)?  Yes  No

Building 1 Type \_\_\_\_\_ Size (sq. m) \_\_\_\_\_ Height (m) \_\_\_\_\_

Building 2 Type \_\_\_\_\_ Size (sq. m) \_\_\_\_\_ Height (m) \_\_\_\_\_

## Section B – Contact Information

Correspondence to:  **Applicant (Required)**  **Owner (Required)**  **Contractor**

Name : (first, last) _____ Address: _____ _____ Community: _____ Postal Code: _____ Phone: _____ Mobile: _____ E-mail: _____		
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## Section C – Building Demolition

Is this a CBRM Tendered Demo?  Yes  No Method used to Demolish: \_\_\_\_\_

Hazard Assessment Completed ?  Yes  No

Hazard Assessment Provided ?  Yes  No Location where Material will be disposed of:  CBRM  Other (Name of facility / address below) \_\_\_\_\_

Start Date \_\_\_\_\_ End Date \_\_\_\_\_

## Section D – Building Renovation

Building Plan Provided, if applicable Deck Included  Yes  No New Foundation  Yes  No Structural Renovation  Yes  No

Value of Work \_\_\_\_\_ Ventilation Included  Yes  No  Confirm Engineers Stamp on Drawing

Building Type: \_\_\_\_\_ # of new Plumbing fixtures: \_\_\_\_\_ Air Conditioning Included  Yes  No Heating Included  Yes  No

If yes, enter Heating Type \_\_\_\_\_

**A Structural Renovation is generally a renovation that involves the supporting of the floor, ceiling, or roof.**

## Section E – Tent Permit

Site Plan Provided  Fabric Certification Provided Is there Electrical Service?  Yes  No Is Alcohol being served?  Yes  No

Floor Plan Provided Is there Food Preparation in Tent?  Yes  No Is heat supplied?  Yes  No

**Fabric Certification is the fabric covering rating on the tent**

## Section F – Building Addition

Site Plan Provided, if Applicable Deck Included  Yes  No Additional Bedrooms \_\_\_\_\_ Addition Area (sq m) \_\_\_\_\_

Building Plans Provided, if Applicable Building Type: \_\_\_\_\_ # of Storeys \_\_\_\_\_ Value of Work \_\_\_\_\_

Corner Lot  Yes  No # of Units Before \_\_\_\_\_ After \_\_\_\_\_ Height (m) \_\_\_\_\_ # of New Plumbing Fixtures \_\_\_\_\_  If New Plumbing Fixtures, Confirm QP Report Provided

**Section G – Building Conversion/Change of Use**

<input type="checkbox"/> Site Plan provided	<b>Building Type</b> Before _____	Deck Included <input type="checkbox"/> Yes <input type="checkbox"/> No	# of new Plumbing Fixtures _____
<input type="checkbox"/> Building Plans provided	After _____	Value of Work: _____	# of Units Before _____ After _____
# of Storeys _____		Site access by Provincial street? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Floor Area of Building (sq. m) _____
Height (m) _____	# of Bedrooms _____	<input type="checkbox"/> If YES, Access Permit provided	Floor Area of Conversion (sq. m) _____

**Section H– Building New Construction**

<input type="checkbox"/> Site Preparation Shed Only	Is Deck Included? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Floor Area (sq m) _____	# of new Plumbing Fixtures _____
<input type="checkbox"/> Recreational Vehicle & Power Shed	Is it on a Corner Lot? <input type="checkbox"/> Yes <input type="checkbox"/> No	# of Storeys _____	<input type="checkbox"/> If New Plumbing Fixtures, Confirm QP
<input type="checkbox"/> Site Plan provided	Building Type _____	Height (m) _____	
<input type="checkbox"/> Building Plans provided	Heating Type _____	# of Units _____	# of Bedrooms _____
<input type="checkbox"/> Confirm Engineers Stamp is on Building Plans, if applicable	New Foundation <input type="checkbox"/> Yes <input type="checkbox"/> No	Site access by Provincial street? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> If YES, Access Permit provided

**Section I – Building Place/Locate**

<input type="checkbox"/> Building Plans provided	<b>What are you Trying to Locate?</b>	<b>Where will the Building be located?</b>	Serial#: _____	Height (m) _____
<input type="checkbox"/> Floor Plan provided	<input type="checkbox"/> New Mobile Home	<input type="checkbox"/> Mobile Home Park	Factory Model _____	# of Storeys _____
<input type="checkbox"/> Site Plan provided	<input type="checkbox"/> New Modular Home	<input type="checkbox"/> Private Property	Total Floor Area (sq. m) _____	# of new Plumbing Fixtures _____
Site access by Provincial street? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> New Two Unit Dwelling	<i>Is it on a Corner Lot?</i>	Dimensions _____	Value of Work _____
<input type="checkbox"/> If YES, Access Permit provided	<input type="checkbox"/> Relocate Existing Building	<input type="checkbox"/> Yes <input type="checkbox"/> No	Is Deck Included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	<i>If relocate, enter Existing Building Type: _____</i>			

**Section J – Development Permit**

<input type="checkbox"/> Site Plan provided	<b>Structure Type</b>	Turbine Height (m) _____	<i>Please Describe Land Use</i>
	<input type="checkbox"/> TELCO Tower	# of Turbines _____	_____
	<input type="checkbox"/> Recreational Vehicle	Site access by Provincial street? <input type="checkbox"/> Yes <input type="checkbox"/> No	_____
	<input type="checkbox"/> Wind Turbine	<input type="checkbox"/> If yes, Access Permit provided	_____
	<input type="checkbox"/> Sign		
	<input type="checkbox"/> Other		

**Section K – Residential Accessory Building**

<input type="checkbox"/> Site Plan provided	Is it on a Concrete Slab? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Floor Area (sq. m) _____	# of Storeys _____	# of new Plumbing Fixtures _____
		<input type="checkbox"/> Confirm Building Plans Provided (if area is greater than 53 sq. m)	Height (m) _____	

**Section L – Swimming Pool/Fence**

Above Ground Pool?  Yes  No      Value of Work \_\_\_\_\_

**Section M – Deck Only**

Total Area (sq m). \_\_\_\_\_ Value of Work \_\_\_\_\_       Wooden Deck Information sheet provided      **OR**       Building Plans and Site Plan Provided

I \_\_\_\_\_ (name) certify that:

1. The information contained in this application, attached plans and other documentation, is true to the best of my knowledge.
2. If the owner is a corporation, partnership, or individual other than myself, I have been authorized to sign on their behalf.
3. I understand that this application is not a permit and does not authorize the applicant to proceed with any work until such time as the permit is issued.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature