

The information on this form is collected under the authority of the *Community Charter*, s. 53. The information provided will be used to process your application. If you have any questions about the collection and use of this information contact the Chief Administrative Officer at 250-749-6681.

TOWN OF LAKE COWICHAN

APPLICATION FOR PERMIT TO BUILD



FOLIO NO.:

PERMIT NO.:

APPLICATION FOR: BUILDING PERMIT DEMOLITION PERMIT

OTHER (specify) _____

(e.g. chimney installation, service connection, building re-location)

APPLICANT INFORMATION		OWNER INFORMATION	
NAME OF APPLICANT(S):		NAME OF OWNER(S):	
APPLICANT'S ADDRESS:		OWNER'S ADDRESS:	
CITY:	POSTAL CODE:	CITY:	POSTAL CODE:
PHONE:	FAX:	PHONE:	FAX:
BUILDER / CONTRACTOR INFORMATION			
NAME:		BUSINESS LICENSE #:	
ADDRESS:			
CITY:	POSTAL CODE:	PHONE:	FAX:
SUB-TRADE LISTING <small>as required by the Town of Lake Cowichan Business License Bylaw</small>			
NAME:		BUSINESS LICENSE #:	
NAME:		BUSINESS LICENSE #:	
NAME:		BUSINESS LICENSE #:	
NAME:		BUSINESS LICENSE #:	
NAME:		BUSINESS LICENSE #:	
NAME:		BUSINESS LICENSE #:	
NAME:		BUSINESS LICENSE #:	
NAME:		BUSINESS LICENSE #:	

A building/construction contractor shall supply to the License Inspector a written list of the names, addresses and telephone numbers of his or her sub trades in the form prescribed.

PROPERTY INFORMATION

CIVIC ADDRESS OF PROPERTY:

LEGAL DESCRIPTION OF PROPERTY:

Complete this section if application is for erection of a new or alteration of a building structure:

ZONING OF PROPERTY:

BUILDING DETAILS

BUILDING TYPE:

(Commercial / Single-Family Dwelling / Two-Family Dwelling / Garage / Addition / etc.)

Area of Building _____ m² Height of building _____ m Highway access obtained: YES / NO

Setbacks

Principal Building

Front Yard _____ m Side Yard _____ m Side Yard _____ m Rear Yard _____ m

Accessory Building

Front Yard _____ m Side Yard _____ m Side Yard _____ m Rear Yard _____

Building Materials

Construction Information

Footings Size :
Depth of Foundation :
Size of beams under main floor :

Size of Joists Under

1st Floor :
2nd Floor :
3rd Floor :

Foundation Walls :
Foundation Footings :
Exterior Surface :
Interior Wall Finish :
Interior Ceiling Finish :
Roof :

Roof Type : FLAT MANSARD
 PEAKED DOMED

SIGNATURE

This permit confirms that the Town of Lake Cowichan has reviewed plans and the application form in respect of the subject building pursuant to the Corporation of the Town of Lake Cowichan Building Bylaw. This permit is not a warranty that the subject building will comply with all Town of lake Cowichan and provincial regulations governing building construction nor that it is without defect.

The undersigned applicant, developer, contractor, or owner agrees to conform with all the bylaws of the Town of Lake Cowichan and to all the statutes and regulations in force in the Town of Lake Cowichan and to save the Town harmless from any action or cost whatsoever arising out of or incident to, the granting of this permit.

The undersigned recognizes that within the boundaries of the Town of Lake Cowichan there are areas of "problem soils", poor drainage and flooding, and that these are widely distributed as to location. I affirm that it is my responsibility to identify foundation condition generally on which the intended construction is to be placed and take all action required to ensure the adequacy of the foundation, and ultimately the safe and sound use and occupancy of the proposed structure.

I have read and agree with the aforementioned. I also understand that no building structure is to be sold or occupied prior to an approved final inspection and the subsequent issuance of an occupancy certificate.

Applicant's Signature

Date

THIS APPLICATION IS MADE WITH MY FULL KNOWLEDGE AND CONSENT

Registered Owner of Subject Property

Date

Where the applicant is not the REGISTERED OWNER, the application must be signed by the REGISTERED OWNER

CALCULATION OF BUILDING VALUES AND APPLICABLE FEES

PERMIT NO. _____	Area (Sq. m)	Value (\$)	<u>OFFICE USE ONLY</u>		
			Calculated Value		
Main Floor with full basement				Building Permit Fees	\$
Main floor with crawlspace / slab on grade				Plumbing Permit Fees	\$
Second Floor				Sanitary Connection Inspection Fees	\$ 30.00
Garage - finished (attached / detached)				Storm Connection Inspection Fees	\$ 30.00
Garage - unfinished (attached / detached)				Water Connection Inspection Fees	\$ 680.00
Carport (attached / detached).				Garbage Service	\$ 140.00
Deck					\$
Finished basement				Miscellaneous (Deposits / Credits)	\$
Total Value of Work		\$	\$	Total Fees Payable	\$

APPROVED BY:

Date

Planning Officer / Chief Administrative Officer

Date

Building Inspector

THIS PERMIT AUTHORIZING COMMENCEMENT OF WORK IS ONLY VALID UPON SIGNATURE BY THE BUILDING INSPECTOR

COMMENTS:

BUILDING INSPECTION

PERMIT NO. _____	DATE	R	P	INSP	DATE	R	P	INSP	DATE	R	P	INSP
Site excavation / footing pre concrete												
Foundation damp proofing / dual drains												
Frame												
Fireplace & w/stove (at damper height)												
Chimney												
Plumbing rough-in												
Service connections												
Insulation / VB												
Final												

REMARKS

CERTIFICATE OF OCCUPANCY

No building must be occupied until a Certificate of Occupancy has been obtained.

Certificate of Occupancy Issued to : _____

Building Inspector

Date