

# Area Municipal Building Inspection Service Committee

*A Partnership of the Municipalities of Alberton, Chapple, Dawson, Lake of the Woods, LaVallee and Rainy River*

## BUILDING CODES & PERMITS INFORMATION SHEET

### OVERVIEW:

The Ontario Building Code is a regulation made under the *Building Code Act*, which by law, must be enforced by all municipalities.

The Code is essentially a set of minimum provisions respecting the safety of buildings with reference to public health, fire protection and structural sufficiency. Its primary purpose is the promotion of public safety through the application of appropriate uniform building standards.

### BUILDING PERMITS:

A Building Permit is a license issued by a municipality, which grants legal permission to begin a construction project. Permits are typically required for new building(s), additions, prefabricated structures and alterations to heating, ventilation, air-conditioning (HVAC) and plumbing systems, and some renovations.

*It is unlawful to start a building project without having first obtained a Building Permit.*

### APPLYING FOR A BUILDING PERMIT:

1. Ensure that your project complies with the municipality's Zoning By-Law(s) – which regulate the use, size, required setbacks, etc., of land and buildings – and with other applicable law, regulations and policies of various Ministries and agencies (i.e. MNR, MTO, Hydro One, Northwestern Health Unit), New Home Warranty, etc. **If you have questions or require further information or clarifications, contact Chief Building Official Henry Van Ael at (807) 276-0473.**
2. Fill out all applicable areas of the Application Form. Sign and date the form in the areas indicated.
3. Adequate drawings and related information which clearly show the building's structure and services as well as the location of all buildings and services on the property must be provided with your application.
4. Submit the completed application form together with the drawings, information and required fee to the municipality for review by the Chief Building Official.

## 2. Method of Calculating Construction Value and Building Permits:

### CONSTRUCTION VALUE:

First Floor:	\$100 per square foot
Second Floor	\$50 per square foot
Basement – Finished:	\$25 per square foot
Cabins, Season Dwellings	\$50 per square foot
Basement – Unfinished:	\$20 per square foot
Garages – Unfinished (attached or detached)	\$20 per square foot
Garages – Finished (attached or detached)	\$25 per square foot
Accessory Buildings or Structures	\$20 per square foot

Barns or Livestock Housing Structures  
constructed on property classified for  
assessment purposes as "Farm" (other  
classes pay at accessory building rate):

	\$5 per square foot
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### BUILDING AND/OR DEVELOPMENT PERMITS:

Permit Fee = .07% of estimated cost of construction.

Minimum Permit Fee:	\$50.00
Demolition Fee:	\$50.00
Swimming Pool Permit Fee	\$50.00
Base fee for first \$1,000 of value	\$50.00
Each additional \$1,000 of value or part thereof	\$ 7.00

**FAILURE TO OBTAIN A BUILDING PERMIT  
WILL RESULT IN AN  
ADDITIONAL \$200 FINE  
ON TOP OF THE COST OF THE BUILDING PERMIT.**

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 <sup>2</sup> )	
B. 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 ( )	
C. 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 ( )	
D. 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 ( )	
E. 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			
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.		<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. Attachments			
i. Attach documents establishing compliance with applicable law as set out in Article 1.1.3.3.			
ii. Attach Schedule 1 for each individual who reviews and takes responsibility for design activities.			
iii. Attach Schedule 2 where application is to construct on-site, install or repair a sewage system.			
iv. Attach types and quantities of plans and specifications for the proposed construction or demolition that are prescribed by the by-law, resolution, or regulation of the municipality, upper-tier municipality, board of health or conservation authority to which this application is made.			
H. Declaration of applicant			
I, _____, certify 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. I have authority to bind the corporation or partnership (if applicable).			
Date	Signature of applicant		

Personal information contained in this form and schedules is collected under the authority of subsection 5(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) 585-6886.

## Schedule 1: Designer Information

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

<b>A. Project Information</b>			
Building number, street name		Unit no.	Lot/con.
Municipality	Postal code	Plan number/ other description	
<b>B. Individual who reviews and takes responsibility for design activities</b>			
Name		Firm	
Street address		Unit no.	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number ( )	Fax number ( )	Cell number ( )	
<b>C. Design activities undertaken by individual identified in Section B. [Building Code Table 2.20.2.1]</b>			
<input type="checkbox"/> House	<input type="checkbox"/> HVAC – House	<input type="checkbox"/> Building Structural	
<input type="checkbox"/> Small Buildings	<input type="checkbox"/> Building Services	<input type="checkbox"/> Plumbing – House	
<input type="checkbox"/> Large Buildings	<input type="checkbox"/> Detection, Lighting and Power	<input type="checkbox"/> Plumbing – All Buildings	
<input type="checkbox"/> Complex Buildings	<input type="checkbox"/> Fire Protection	<input type="checkbox"/> On-site Sewage Systems	
Description of designer's work			
<b>D. Declaration of Designer</b>			
I _____ declare that (choose one as appropriate): (print name)			
<input type="checkbox"/> I review and take responsibility for the design work on behalf of a firm registered under subsection 2.17.4. of the Building Code. I am qualified, and the firm is registered, in the appropriate classes/categories. Individual BCIN: _____ Firm BCIN: _____			
<input type="checkbox"/> I review and take responsibility for the design work and am qualified in the appropriate category as an "other designer" under subsection 2.17.5. of the Building Code. Individual BCIN: _____ Basis for exemption from registration: _____			
<input type="checkbox"/> The design work is exempt from the registration and qualification requirements of the Building Code. Basis for exemption from registration and qualification: _____			
I certify that:			
1. The information contained in this schedule is true to the best of my knowledge. 2. I have authority to bind the corporation or partnership (if applicable).			
Date		Signature of Designer	

\*For the purposes of this form, "individual" means the "person" referred to in Clause 2.17.4.7.(1)(d), Article 2.17.5.1. and all other persons who are exempt from qualification under Subsections 2.17.4. and 2.17.5.

**NOTE:**

1. Firm and Individual BCIN numbers are not required for building permit applications submitted prior to January 1, 2006
2. Schedule 1 does not need to be completed by architects, or holders of a Certificate of Practice or a Temporary License under the *Architects Act*.