

**Development Services** 424 3<sup>rd</sup> Avenue West Prince Rupert, BC, V8J 1L7 **Phone:** (250) 627 0960 **Fax:** (250) 627 0979

Email: building@princerupert.ca

## APPLICATION FOR A PERMIT TO ERECT A BUILDING OR STRUCTURE

(PLEASE PRINT CLEARLY)		
OFFICE USE ONLY		
Date Received:	Roll #:	Building Permit No.:
APPLICANT:		
Name (Please Print):		
Address:		
Phone #:	Email:	
CONTRACTOR		
Name:		
Address:		
Phone #:	Email:	
REGISTERED OWNER(S):		
Name.		
Address:		
Phone #:	Emaii:	
PROJECT DESCRIPTION:		
Application for Permission to:		
Total Cost of Alteration, including labour/m	aterials as ner contract	price or estimate of Building Inspector:
Total Cost of Alteration, including labour/in	ateriais, as per contract	price of estimate of building inspector.
CUR IFOT PROPERTY INFORMATION		
SUBJECT PROPERTY INFORMATION:		
Civic Address:		
Legal Description:		
(Lot/Block/Section/Plan)		

BUILDING DETAILS (ONLY REQUIRED FOR NEW BUILDINGS/STRUCTURES):					
Lot size:	_ Front: Area:		Si	de:	_ Back:
Building size:				Total Area:	
	nt e (Y/N):	Side:	Side:		Back:
Lot coverage: (% pro	oposed/% permitted)	Living area:		Acc. Blds.:	
No. of buildings on s	site:	No. of stories:		Height of Buildir	ng:
**ALL CONSTRUCTION IS TO BE TO B.C. BUILDING CODE STANDARDS** THIS APPLICATION IS NOT TO BE CONSIDERED AS A PERMIT AND DOES NOT AUTHORIZE THE COMMENCEMENT OF WORK					
AUTHORIZATION:					
The undersigned cerabove real Property.		nformation is true and	that he/sl	ne is the owner or	duly authorized agent for the
Signature of the app	licant:	D	ate:		

	FOR OFFICE USE (	ONI Y	
Type of Work:	1. New 2. Addition 3. Alteration 4. Wreck and Remove		
Class of Construction:	11 Test 2 Tradition of Thiolassian II Triody and Testion		
		3. Suite 4. Multi Family 5. Accessory  Commercial 9. Plumbing 10. Sign	
Critical? (Y/N):	6. Industrial 7. Institutional 8. Commercial 9. Plumbing 10. Sign 11. Single Dwelling Garage 12. Multiple Dwelling Garage		
Dwelling Units:			
Building Area: Zoning of	Site: Fee Paid:	Security Deposit Taken? (Y/N):	
Inspector's Initials: Survey Certification	ate Required? (Y/N): Drawin	ngs Attached? (Y/N): Dev Permit #	
	APPROVAL		
The above application has been approv	ved and upon payment of the Bui	ilding Permit fee a permit will be issued	
work may be started.		Date:	
PAID BY: CHEQUE/CASH/DEBIT/CR			
	EDII RECEIPI	INITIALS	
FEES FOR A SINGLE OR TWO-FAMILY	DWELLING	T	
Construction cost: Living space Unfinished/garage s	= square footage X \$200 space = square footage X \$100	(Construction cost rounded up to the nearest thousand dollars)	
Living Space Sq Ft X \$200.00	· =	=X PERMIT FEE PER \$1000:	
Garage Space Sq Ft X \$100.00	=		
Leveling Fee TOTAL =		= SUBTOTAL:	
		+ LEVELING FEE:	
		= TOTAL:	
Plumbing Permit: Fee of \$35 for first fixture, and \$10 for each	ch additional fixtures. Minimum	fee of \$75.	
Number of Fixtures  Total Cost			
Total Permit Costs:			
Plan Review: \$129			
Building Permit:			
Plumbing Permit:			
Sanitary Connection:	·		
Sanitary Connection Inspection:	Damage Deposit: \$500		
TOTAL:	_		



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## **ACKNOWLEDGEMENTS OF OWNER**

RE: BUILDING BYLAW 3314, 2011 – FORM B

I acknowledge that the owner of the land with respect to which this permit is issued is solely responsible for carrying out the work authorized by this permit in accordance with the Building Code and other applicable laws respecting safety, including the requirements of the Building Code in relation to soil conditions for building foundations.

I acknowledge that the owner of the land is also solely responsible for determining whether the work authorized by this permit contravenes any covenant, easement, right of way, building scheme or other restriction affecting the building site, and whether the work requires the involvement of an architect under the Architect's Act or an engineer or geoscientist under the Engineers and Geoscientists Act.

I acknowledge that the City provides a limited monitoring service in relation to building construction and does not, by accepting or reviewing plans, inspecting construction, monitoring the construction by others, or issuing the building or occupancy permits, make any representation or give any assurance that the construction authorized by this permit complies in every or any respect with the Building Code or any other applicable laws respecting safety.

If the City of Prince Rupert has so indicated on this permit, I acknowledge that the City has issued the permit in reliance on the certification of a registered professional, engaged by me to provide such a certification that the plans for the work authorized by the permit comply with the Building Code and other applicable enactments, and that the fee for the issuing of this permit or any occupancy permit make no representations to me or any other person as to any such compliance.

Registered Owner's Name (please print)	Signature of Registered Owner or Authorized Signatory of Corporate Owner		
Contact Phone Number	Date Signed		
Legal Description of	Civic Address of Property		

Once this document has been duly executed, please return it to the Development Services Department either in person at 424 3<sup>rd</sup> Avenue West, by fax at (250) 627 0979, or scan and email to: <u>devserv@princerupert.ca</u>.



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## **REQUIRED INSPECTIONS**

OFFICE USE ONLY							
Date Received:	Roll #:	Building	Permit No:				
Site Address: Owner/Agent:		::					
Deguired Increations							
Required Inspections:			O't of Division Division				
Of the following inspections, <b>those marked with an "X" are require</b> d to be carried out by a City of Prince Rupert Building Inspector for the work authorized under the permit referenced above. Approval of the construction must be given before continuing with the work. At least 24 hours advance notice is to be given prior to the inspection.							
Inspection Required	Date	Inspector	Approved				
Excavation							
Footing Forms (*Before Pouring)							
Foundation Forms (*Before Pouring)							
Survey Certificate (*Before Pouring Foundation)							
Drain tile/Damp proofing							
Water/Sewer/Storm (application at Public Works)							
Consolidate Lots							
Concrete Slabs							
Engineered Drawings							
First Window							
Framing/Masonry							
Insulation/Vapour Barrier							
Plumbing							
Copy of Approved Service Connection Application							
X Occupancy/Final							
AUTHORIZATION:		- I					
As applicant or approved agent, I understand and acknowledge that I am responsible for calling for those inspections above marked with an "X" and for obtaining approval of the construction before proceeding with work. Occupancy without written consent from the Building Department will result in a fine.							
Owner/Agent Signature: Date:							
Witness: Date:							
COPY GIVEN TO OWNER AT TIME OF APPLICATION? YES  NO  Receipt No:							
COPY GIVEN TO PUBLIC WORKS? YES  NO							