



# Building Permit Application

**Complex or Commercial**

1903 Mount Newton Cross Road Saanichton BC V8M 2A9 250 544-4217 www.centrialsaanich.ca

This collection of personal information is authorized under the *Local Government Act, Community Charter and Freedom of Information and Protection Privacy Act*. The information will be used for administering this permit, which may include sharing your contact information with WorkSafe BC. Questions can be directed to the District's Information and Privacy Officer at 250-652-4444 or municipal.hall@csaanich.ca.

Folder/Permit No.  
**BP00**

**Project Info**

Address					Zoning
Lot	Section	Range	Plan	PID	Folio
Project Description					Project Value \$

**Building Use**

Multi-Res <input type="checkbox"/>	Mixed Use <input type="checkbox"/>	Commercial <input type="checkbox"/>	Industrial <input type="checkbox"/>	Institutional <input type="checkbox"/>	<input type="checkbox"/> _____
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**Documents and Information**

- Recent Title Search (30 days)
- Schedules, FORM 2 and Insurance
- DCC Reduction Application (if applicable)
- Run-off Control Plan     HPO

**Construction**

New <input type="checkbox"/>	Addition <input type="checkbox"/>	Renovation <input type="checkbox"/>	Demolition <input type="checkbox"/>	Renewal <input type="checkbox"/>	<input type="checkbox"/> _____
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**Owner**

Name(s)/Company			Contact (if applicable)		
Address		City	Postal Code		receive emails
					plan <input type="checkbox"/>
Tel		Cell	email		review <input type="checkbox"/>
					site notice <input type="checkbox"/>

**If Applicable application.**

*I, the owner of the above property, hereby authorize and appoint \_\_\_\_\_ as my agent for this*

Please Circle Applicable

**Applicant or Contractor**

Name/Company		Contact	Business Licence No. & Municipality		
Address		City	Postal Code		receive emails
					plan <input type="checkbox"/>
Tel		Cell	email		review <input type="checkbox"/>
					site notice <input type="checkbox"/>

**Contractor or Designer/Registered Professional**

Name/Company		Contact	Business Licence No. & Municipality		
Address		City	Postal Code		receive emails
					plan <input type="checkbox"/>
Tel		Cell	email		review <input type="checkbox"/>
					site notice <input type="checkbox"/>

**Form 1 Owner's Acknowledgement**

- I acknowledge that the owner of the land in respect of 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 *Engineer's and Geoscientist's Act*.
- I acknowledge that the District of Central Saanich provides a limited monitoring service in relation to building construction and does not, by accepting or reviewing plans, inspecting construction, monitoring the inspection of construction by others, or issuing building or occupancy permits, make any representation or give any assurance that the construction authorized by this permit complies in any respect with the Building Code or any other applicable laws respecting safety.
- If the District of Central Saanich has so indicated on this permit application, I acknowledge that the District will issue 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 permit has been accordingly reduced. I acknowledge that the District, by issuing this permit or any occupancy permit, makes no representations to me or any other person as to any such compliance.

***The undersigned owner/authorized agent of the owner makes application for the permit specified herein, and declares that the information submitted in support of the application is true and correct in all respects.***

Owner's Signature – Required	Date	Authorized Agent Signature – If Applicable	Date
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## Checklist

Must be completed as part of a Commercial/Industrial/Multi-family/Mixed-use Building Permits Application (other than small residential)

	Existing Area <i>m<sup>2</sup></i>	New Area <i>m<sup>2</sup></i>	Occupancy Classification(s) <i>A – F3</i>	Construction Requirements <i>3.2.2. or 9.10</i>	Suite FRR	Corridor FRR	# Exits From Floor Area	Actual Travel Distance ( <i>along walls</i> )
Basement								
Main								
Mezzanine								
2 <sup>nd</sup> level								
3 <sup>rd</sup> level								
4 <sup>th</sup> level								
5 <sup>th</sup> level								
<b>Total</b>								

### Classification and Design

Div. B  
3.2.2 or 9.10.2

Building Area (defined BCBC)	Number of Streets Facing – identify access lane <input type="checkbox"/> One <input type="checkbox"/> Two <input type="checkbox"/> Three	<input type="checkbox"/> Sprinklered <input type="checkbox"/> Unsprinklered	<input type="checkbox"/> Combustible <input type="checkbox"/> Non-combustible
Floor/Mezz/Support FRR	Roof FRR	<input type="checkbox"/> Standpipe <input type="checkbox"/> Not Required	<input type="checkbox"/> Fire Alarm <input type="checkbox"/> No Fire Alarm
Compliance with one of <input type="checkbox"/> NECB <input type="checkbox"/> ASHRAE 90.1 <input type="checkbox"/> Energy Step Code _____		Parking Garage as Separate Building <input type="checkbox"/> Yes <input type="checkbox"/> No	Firewalls for Separate Buildings <input type="checkbox"/> Yes <input type="checkbox"/> No

### Spatial Separation *Div. B 3.2.3 or 9.10.14*

**OR** detailed calculations provided on plans due to complexity

#### REQUIRED INFORMATION

	Wall Area (m <sup>2</sup> )	Ratio l/h	Limiting Distance (m)	Permitted Openings (%)	Actual Openings (%)	Wall Construction	Cladding	Wall FRR
North						<input type="checkbox"/> Combustible <input type="checkbox"/> Noncombustible	<input type="checkbox"/> Combustible <input type="checkbox"/> Noncombustible	
South						<input type="checkbox"/> Combustible <input type="checkbox"/> Noncombustible	<input type="checkbox"/> Combustible <input type="checkbox"/> Noncombustible	
East						<input type="checkbox"/> Combustible <input type="checkbox"/> Noncombustible	<input type="checkbox"/> Combustible <input type="checkbox"/> Noncombustible	
West						<input type="checkbox"/> Combustible <input type="checkbox"/> Noncombustible	<input type="checkbox"/> Combustible <input type="checkbox"/> Noncombustible	

### Health/ Plumbing

Div. B  
3.7

Occupancy Class	Floor Level	Occupant Load	Required/Provided Male <i>/</i>	Required/Provided Female <i>/</i>	Universal Toilet Rm
Occupancy Class	Floor Level	Occupant Load	Required/Provided Male <i>/</i>	Required/Provided Female <i>/</i>	Universal Toilet Rm
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### Accessibility

Div. B  
3.8

Accessibility provided to <input type="checkbox"/> Entrance	Accessibility provided to <input type="checkbox"/> Floor Levels -	Accessibility provided to <input type="checkbox"/> Parking Space	Accessibility provided to <input type="checkbox"/> Washrooms
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