



Building Permit Checklist: Residential Additions

- 1. Completed Building Permit Application Form**
- 2. Schedule 1 Form (designer information) (if applicable)**
- 3. Schedule 3 Form (deposit refund information/owner's authorization) (if applicable)**
- 4. Energy Efficiency Design Summary**
- 5. Site Plan**
 - a. One copy of a sketch to scale showing the property dimensions with setbacks to all existing and proposed structures. The location of the septic system, nearby power lines and wells must also be shown on the site plan.
- 6. Building Plans**
 - a. All plans (unless exempt) must be designed by a person (architect, engineer or designer) registered/licensed with the province of Ontario and have a BCIN number.
 - b. Details, including: floor plan, foundation plan, wall and roof specifications, elevation drawings, etc. must be provided.
- 7. Truss Layout (if applicable)**
- 8. Septic Permit from South Nation Conservation (if applicable)**
- 9. HVAC Design (if applicable)**

Please note: Depending on the property's location, further documentation may be required (SDG Counties setback permits, MTO land use permits, entrance permits, conservation authority permits, etc.)

Application for a Permit to Construct or Demolish

This form is authorized under subsection 8(1.1) of the *Building Code Act, 1992*

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 ²)		
B. Purpose of application				
New construction	Addition to an existing building	Alteration/repair	Demolition	Conditional Permit
Proposed use of building		Current use of building		
Description of proposed work				
C. Applicant				
		Applicant is: Owner or 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	
D. 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	

E. Builder (if known)				
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
F. New home construction licensing requirement				
i. Is the proposed construction for a new home as defined in the <i>New Home Construction Licensing Act, 2017</i> ? If no, go to section G.			Yes	No
ii. Is a licence required under the <i>New Home Construction Licensing Act, 2017</i> ?			Yes	No
iii. If yes to (ii) provide licence number(s): _____				
G. Required Schedules				
i) Attach Schedule 1 for each individual who reviews and takes responsibility for design activities.				
ii) Attach Schedule 2 where application is to construct on-site, install or repair a sewage system.				
H. Completeness and compliance with applicable law				
i) This application meets all the requirements of clauses 1.3.1.3 (5) (a) to (d) of Division C of the Building Code (the application is made in the correct form and by the owner or authorized agent, all applicable fields have been completed on the application and required schedules, and all required schedules are submitted). Payment has been made of all fees that are required, under the applicable by-law, resolution or regulation made under clause 7(1)(c) of the <i>Building Code Act, 1992</i> , to be paid when the application is made.			Yes	No
ii) This application is accompanied by the plans and specifications prescribed by the applicable by-law, resolution or regulation made under clause 7(1)(b) of the <i>Building Code Act, 1992</i> .			Yes	No
iii) This application is accompanied by the information and documents prescribed by the applicable by-law, resolution or regulation made under clause 7(1)(b) of the <i>Building Code Act, 1992</i> which enable the chief building official to determine whether the proposed building, construction or demolition will contravene any applicable law.			Yes	No
iv) The proposed building, construction or demolition will not contravene any applicable law.			Yes	No
I. Declaration of applicant				
I _____ declare 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. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.				
_____		_____		
Date		Signature of applicant		

Personal information contained in this form and schedules is collected under the authority of subsection 8(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., 12th Floor. Toronto, ON M7A 2J3 (416) 585-6666.

Schedule 1: Designer Information

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

A. Project Information			
Building number, street name		Unit no.	Lot/con.
Municipality	Postal code	Plan number/ other description	
B. Individual who reviews and takes responsibility for design activities			
Name		Firm	
Street address		Unit no.	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number	Fax number		Cell number
C. Design activities undertaken by individual identified in Section B. [Building Code Table 3.5.2.1. of Division C]			
House	HVAC – House		Building Structural
Small Buildings	Building Services		Plumbing – House
Large Buildings	Detection, Lighting and Power		Plumbing – All Buildings
Complex Buildings	Fire Protection		On-site Sewage Systems
Description of designer's work			
D. Declaration of Designer			
<p>I _____ declare that (choose one as appropriate):</p> <p style="text-align: center;">(print name)</p> <p>I review and take responsibility for the design work on behalf of a firm registered under subsection 3.2.4. of Division C, of the Building Code. I am qualified, and the firm is registered, in the appropriate classes/categories.</p> <p>Individual BCIN: _____</p> <p>Firm BCIN: _____</p> <p>I review and take responsibility for the design and am qualified in the appropriate category as an "other designer" under subsection 3.2.5. of Division C, of the Building Code.</p> <p>Individual BCIN: _____</p> <p>Basis for exemption from registration: _____</p> <p>The design work is exempt from the registration and qualification requirements of the Building Code.</p> <p>Basis for exemption from registration and qualification: _____</p> <p>I certify that:</p> <ol style="list-style-type: none"> 1. The information contained in this schedule is true to the best of my knowledge. 2. I have submitted this application with the knowledge and consent of the firm. <p style="text-align: center;"> _____ Date Signature of Designer </p>			

NOTE:

1. For the purposes of this form, "individual" means the "person" referred to in Clause 3.2.4.7(1) (c) of Division C, Article 3.2.5.1. of Division C, and all other persons who are exempt from qualification under Subsections 3.2.4. and 3.2.5. of Division C.
2. Schedule 1 is not required to be completed by a holder of a license, temporary license, or a certificate of practice, issued by the Ontario Association of Architects. Schedule 1 is also not required to be completed by a holder of a license to practise, a limited license to practise, or a certificate of authorization, issued by the Professional Engineers Ontario.

Schedule 3: Consent and Acknowledgment

A. Project Information		
Building number and street name:		
Description of proposed work:		
B. Inspection and Lot Grading Deposits (As per Schedule "B" to By-law No. 2023-033, as amended)		
<p>A refundable inspection deposit (the "Inspection Deposit") is charged for various permits issued under the <i>Building Code Act, 1992</i> (the "BCA"). The amount of the Inspection Deposit is based on the construction value of the work. The full amount of the Inspection Deposit is refundable, if the work is completed in accordance with the timelines prescribed in Schedule "B" to By-law #2023-033, as amended.</p> <p>Prior to refunding the Inspection Deposit, the applicant/permit holder shall obtain a final inspection. The Inspection Deposit will be refunded to the PERSON/CORPORATION indicated below, once the final inspection has passed. An amount equal to twenty-five percent (25%) of the original Inspection Deposit will be deducted annually by the Corporation of the Township of South Stormont (the "Township"), beginning on the second anniversary following the date of permit issuance, for a permit that has not obtained a PASSED final inspection. Pursuant to Building By-law #2023-033, as amended, additional fees, such as for re-inspections, incurred by the permit holder, may be deducted from the Inspection Deposit.</p> <p>In addition, a refundable lot grading deposit (the "Lot Grading Deposit") is charged for various permits issued under the BCA. The full amount of the Lot Grading Deposit is refundable, if the work is completed in accordance with the timelines (within two (2) years of date of permit issuance) prescribed in Schedule "B" to By-law #2023-033, as amended. In addition, an amount equal to fifty percent (50%) of the original Lot Grading Deposit is refundable if the work is completed between two (2) and three (3) years of date of permit issuance.</p> <p>I hereby acknowledge that I have read and understand that it is the responsibility of the applicant/permit holder to notify the Township for all required inspections, including the final inspection, in order to obtain the Inspection Deposit and/or Lot Grading Deposit refund(s).</p>		
_____	_____	
Date	Signature of applicant	
Name of person/corporation to return deposit(s) to:		
Complete mailing address:		
C. Agent Authorization		
Last name (agent)	First name (agent)	Corporation or partnership
Street address		
City/Town	Postal code	Province
Telephone number ()	Cell number ()	E-mail
<p>I, _____ am the registered owner(s) of the property described in this application (print name of owner)</p> <p>form and do hereby authorize _____ to make applications and amendments on my behalf. (print name of authorized agent)</p> <p>It is understood that I/we will abide by all by-laws of the Township and that any approvals granted by this application will be carried out in accordance with municipal, provincial and federal requirements.</p>		
_____	_____	
Date	Signature of property owner	
D. Incomplete Application		
<p>I, _____, am the owner or authorized agent of the owner (print name of owner/authorized agent)</p> <p>and do hereby acknowledge that this application is deemed to be incomplete and is not entitled to the time periods prescribed in <i>O. Reg. 332/12: BUILDING CODE</i> or <i>O. Reg. 163/24: BUILDING CODE</i> (the "Ontario Building Code"), as amended, as the case may be.</p> <p>Notwithstanding the above, I wish to have the application accepted for processing and understand that a permit will not be issued until all the required information is submitted and reviewed for compliance by the Chief Building Official or their designate.</p>		
_____	_____	
Date	Signature of owner/authorized agent	

Energy Efficiency Design Summary: Prescriptive Method

(Building Code Part 9, Residential)

This form is used by a designer to demonstrate that the energy efficiency design of a house complies with the building code using the prescriptive method described in Subsection 3.1.1. of SB-12. This form is applicable where the ratio of gross area of windows/sidelights/skylights/glazing in doors and sliding glass doors to the gross area of peripheral walls is not more than 22%.

For use by Principal Authority	
Application No:	Model/Certification Number

A. Project Information

Building number, street name	Unit number	Lot/Con
Municipality	Postal code	Reg. Plan number / other description

B. Prescriptive Compliance [indicate the building code compliance package being employed in this house design]

SB-12 Prescriptive (input design package): Package: _____ Table: _____

C. Project Design Conditions

Climatic Zone (SB-1):	Heating Equipment Efficiency	Space Heating Fuel Source
<input type="checkbox"/> Zone 1 (< 5000 degree days)	<input type="checkbox"/> ≥ 92% AFUE	<input type="checkbox"/> Gas <input type="checkbox"/> Propane <input type="checkbox"/> Solid Fuel
<input type="checkbox"/> Zone 2 (≥ 5000 degree days)	<input type="checkbox"/> ≥ 84% < 92% AFUE	<input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Earth Energy
Ratio of Windows, Skylights & Glass (W, S & G) to Wall Area		Other Building Characteristics
Area of walls = _____ m ² or _____ ft ²	W, S & G % = _____	<input type="checkbox"/> Log/Post&Beam <input type="checkbox"/> ICF Above Grade <input type="checkbox"/> ICF Basement <input type="checkbox"/> Slab-on-ground <input type="checkbox"/> Walkout Basement <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Combo Unit <input type="checkbox"/> Air Sourced Heat Pump (ASHP) <input type="checkbox"/> Ground Sourced Heat Pump (GSHP)
Area of W, S & G = _____ m ² or _____ ft ²	Utilize window averaging: <input type="checkbox"/> Yes <input type="checkbox"/> No	

D. Building Specifications [provide values and ratings of the energy efficiency components proposed]

Energy Efficiency Substitutions			
<input type="checkbox"/> ICF (3.1.1.2.(5) & (6) / 3.1.1.3.(5) & (6))			
<input type="checkbox"/> Combined space heating and domestic water heating systems (3.1.1.2.(7) / 3.1.1.3.(7))			
<input type="checkbox"/> Airtightness substitution(s) Airtightness test required (Refer to Design Guide Attached)	<input type="checkbox"/> Table 3.1.1.4.B Required: _____	Permitted Substitution: _____	
	<input type="checkbox"/> Table 3.1.1.4.C Required: _____	Permitted Substitution: _____	
	Required: _____	Permitted Substitution: _____	
Building Component	Minimum RSI / R values or Maximum U-Value ⁽¹⁾	Building Component	Efficiency Ratings
Thermal Insulation	Nominal Effective	Windows & Doors Provide U-Value ⁽¹⁾ or ER rating	
Ceiling with Attic Space		Windows/Sliding Glass Doors	
Ceiling without Attic Space		Skylights/Glazed Roofs	
Exposed Floor		Mechanicals	
Walls Above Grade		Heating Equip.(AFUE)	
Basement Walls		HRV Efficiency (SRE% at 0° C)	
Slab (all >600mm below grade)		DHW Heater (EF)	
Slab (edge only ≤600mm below grade)		DWHR (CSA B55.1 (min. 42% efficiency))	# Showers _____
Slab (all ≤600mm below grade, or heated)		Combined Heating System	

(1) U value to be provided in either W/(m²•K) or Btu/(h•ft²•F) but not both.

E. Designer(s) [name(s) & BCIN(s), if applicable, of person(s) providing information herein to substantiate that design meets the building code]

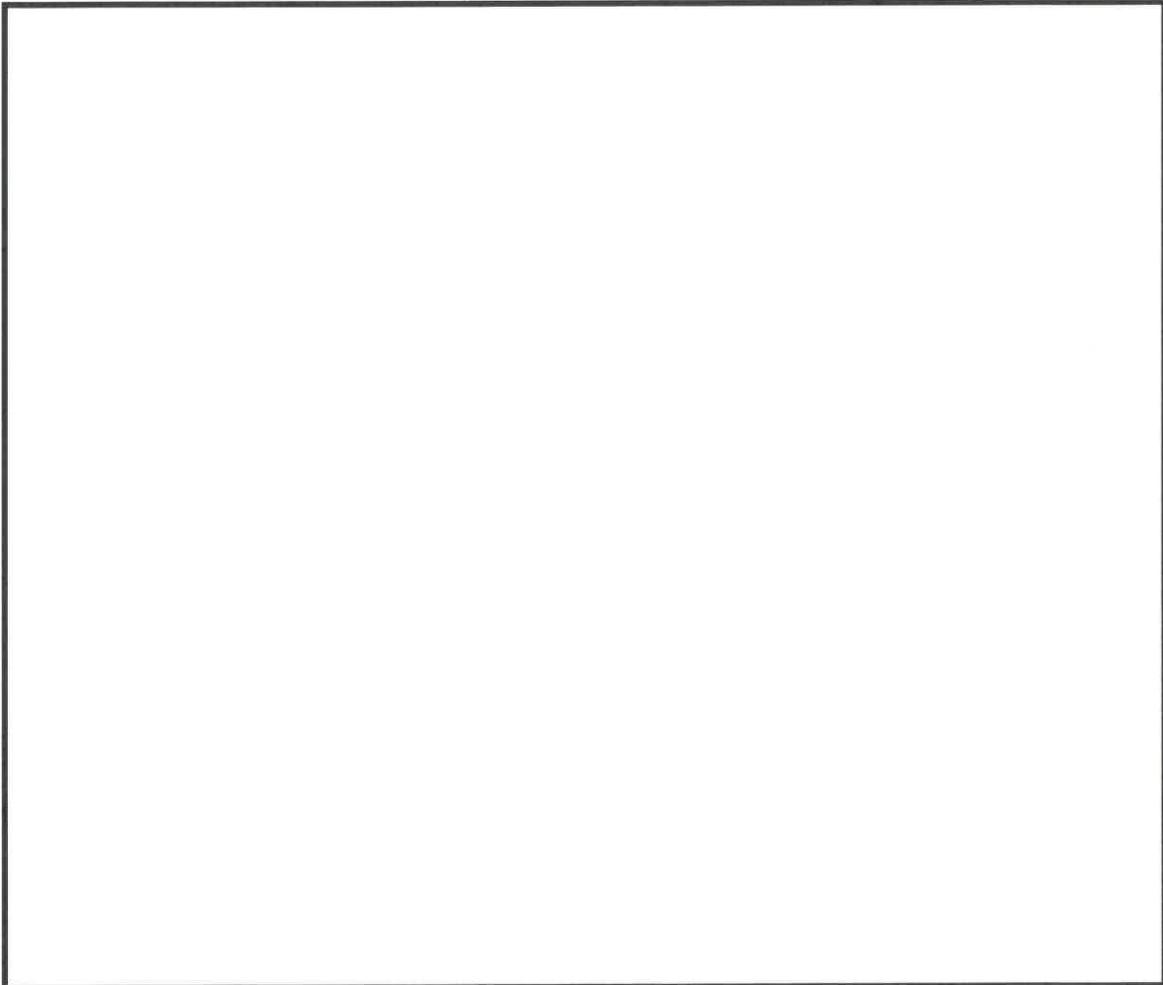
Qualified Designer Declaration of designer to have reviewed and take responsibility for the design work.		
Name	BCIN	Signature

PLOT PLAN

Please include the following information on your plan:

1. Please indicate a north arrow, street or road name.
2. The distance of proposed building to all 4 Property Lines (all 4 sides).
3. The distance of proposed building within 500 metres of each of the following:

Existing Buildings:	Septic Systems:
Creeks, Stream & Rivers:	Hydro Lines:
Kennels:	Livestock Operations:
Manure Storage Systems:	Pit & Quarry:



THIS SHEET MUST BE FILLED OUT

Signature: _____