



Building Permit & Inspection Services Permit Application Information

FOR OFFICE USE ONLY

<input type="checkbox"/> Change of Use		<input type="checkbox"/> Property Standards		<input type="checkbox"/> Sign By-law		<input type="checkbox"/> Fire Code Retrofit		<input type="checkbox"/> Occupancy		
Address (Location of Work Being Done) 453 DREW ST			Unit No.	Lot No.	Registered Plan No.			Brownfield Yes <input type="checkbox"/> Spec. Cond. Yes <input type="checkbox"/>		
Added / Deleted Number of Dwelling Units		No. of Lodging Units		No. of Bedrooms		Height in Storeys		Level(s) of Basement		
MHP#		Total Floor Area (m ²)		CLOCA #		Yes <input type="checkbox"/>		C. of A. # Yes <input type="checkbox"/>		
Zoning District R5-A		Permitted Use (By-law Use Only) 2-unit House - not registered							Date (mmm/dd/yy)	

Notes to Inspector:	Initial Permit Fee	\$ 134	APPLNT OWNER	<input checked="" type="checkbox"/>	Date	JUNE 28/18
	Application Taken By	DL	Plans Examiner			AP
	Approved Value	\$ 1600				
	Project Type	2	Construction Type	L	Plans Type	
Energy Package: EEDS <input type="checkbox"/>	★ A1 A2 A3 A4 A5 A6 B1 B2 B3 B4 B5 B6 C1 C2 C3 C4		Plumber			
Subdivision/Condominium/SPA Conditions			Description of Proposed Work (for OLI) INTERIOR RENOVATION BATHROOM			

		Init.	Date (mmm/dd/yy)	Init.	Date (mmm/dd/yy)					
Zoning Review		DL	Apr 17/18	DL	JUNE 27/18	City	\$		Date	X
Site Plan/Subd. Agreement						Region of Durham	\$		Date	
Site Plan/Subd. Agreement						Education	\$		Date	
Site Plan/Subd. Agreement						Parkland Dedication	\$		Date	
Architectural Review		Ab	05/07/19			S.S.C. #	\$		Date	
Structural Review		Ab	05/07/19			R.R.D. #	\$		Date	
HVAC Review						Conditional Permit Fees	\$		Date	
Plumbing Review						Additional Permit Fees	\$		Date	
Fire Services Review						Additional Permit Fees	\$		Date	
Lightweight Framing	Floor(s) Roof Both					Alternative Solution	\$		Date	
Site Alteration Bylaw				Manager		Site Services	Foundation	Structural	Shell	Full
Engineering Services				M.T.O.		Authorized By				AP
Region of Durham, Works				M.O.E.		Date (mmm/dd/yy)				05/07/19
Owner's Authorization	N/A			Letter of Undertaking						
Temporary Crane				Professional Review		Permit Issued By				LC
Site Plan Control				A M S E FP P SS		Issued Date (mmm/dd/yy)				MAY 7, 19

<input checked="" type="checkbox"/> Permit is ready 05/07/19	<input checked="" type="checkbox"/> Inform applicant by and date	<input checked="" type="checkbox"/> Revisions and/or additional information are required JUNE 28/18	<input type="checkbox"/> Waiver Received
Processing time for complete application: <input checked="" type="checkbox"/> 10 days <input type="checkbox"/> 15 days <input type="checkbox"/> 20 days <input type="checkbox"/> 30 days <input type="checkbox"/> N/A		Decision Date (mmm/dd/yy) JULY 12/18	

BUILDING PERMIT APPLICATION NUMBER 201800757

ESA Phase 1	ESA Phase 2	R.S.C.	Disclaimer	N/A	O.B.C. (year)	Occupancy	Part 9	3.2.2.	High Bldg.
		MOE#			2012	Construction Type			
						Non Combustible	Combustible	<input checked="" type="checkbox"/>	

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: 201800 757	Permit number (if different):		
Date received: JUNE 27/18	Roll number:		
Application submitted to: The City of Oshawa (Name of municipality, upper-tier municipality, board of health or conservation authority)			
A. Project Information			
Building number, street name 453 Drew Street	Unit number 1	Lot/con.	
Municipality Oshawa	Postal code L1H 5B6	Plan number/other description	
Project value est. \$ 1000	Area of work (m ²)		
B. Purpose of application			
<input type="checkbox"/> New construction <input type="checkbox"/> Addition to an existing building <input checked="" type="checkbox"/> Alteration/repair <input type="checkbox"/> Demolition <input type="checkbox"/> Conditional Permit			
Proposed use of building: Duplex		Current use of building Duplex	
Description of proposed work New wall and door, for bathroom and bedroom on main floor.			
C. Applicant			
Applicant is: <input checked="" type="checkbox"/> Owner or <input type="checkbox"/> Authorized agent of owner			
Last name Section 14(1)	First name Section 14(1)	Corporation or partnership	
Street address 453 Drew Street		Unit number 1	Lot/con.
Municipality Oshawa	Postal code L1H 5B6	Province Ontario	E-mail Section 14(1)
Telephone number ()	Fax ()	Cell number Section 14(1)	
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 (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 ()	
F. Tarion Warranty Corporation (Ontario New Home Warranty Program)			
i. Is proposed construction for a new home as defined in the Ontario New Home Warranties Plan Act? If no, go to section G.		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
ii. Is registration required under the Ontario New Home Warranties Plan Act?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
iii. If yes to (ii) provide registration 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).		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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 Building Code Act, 1992, to be paid when the application is made.		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> 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 Building Code Act, 1992.		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> 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 Building Code Act, 1992 which enables the chief building official to determine whether the proposed building, construction or demolition will contravene any applicable law.		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
iv) The proposed building, construction or demolition will not contravene any applicable law.		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
I. Declaration of applicant			
I, Section 14(1)		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 Section 14(1)			
27th June 2018		_____	
Date		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., 2nd Floor, Toronto, M5G 2E5 (416) 585-6666.