



Zoning Compliance Form

| |
|--------------------------------------|
| Township of Malahide Use Only |
| Address of Project: |
| Roll Number: |
| Date Received: |

| | | | | | |
|---|-----------|---------------------------|------------|----------------|----|
| 1. Zoning Compliance | | | | | |
| <i>To obtain property zoning information visit elginmapping.ca, see the Township of Malahide Zoning By-law or contact the Township of Malahide Building Department</i> | | | | | |
| Property Zoning: | | Proposed use of building: | | | |
| Building Size | Width | Length | Height | Area | |
| Lot Size | Frontage | Depth | Lot Area | Lot Coverage % | |
| Required Setbacks | Side Yard | Side Yard | Front Yard | Rear Yard | |
| Setbacks Provided | Side Yard | Side Yard | Front Yard | Rear Yard | |
| 2. Site Plan Control or Zoning Amendment | | | | Yes | No |
| Is this application conditional on site plan control or a zoning amendment? | | | | | |
| <i>If yes, provide confirmation of approval.</i> | | | | | |
| 3. Livestock or Non-Livestock Related Construction | | | | Yes | No |
| Is the proposed construction livestock related? | | | | | |
| <i>If no, move to section 4. If yes, skip to section 5.</i> | | | | | |
| 4. Non-Livestock Related Construction Only | | | | Yes | No |
| Are there any structures capable of housing livestock within 750m (2460ft) of this proposed structure? | | | | | |
| <i>If yes, provide a Minimum Distance Separation I calculation form and skip to section 6. If no, skip to section 6.</i> | | | | | |
| 5. Livestock Related Construction Only | | | | Yes | No |
| Are there any residential structures within 750m (2460ft) of this proposed livestock related structure? | | | | | |
| <i>If yes, provide a Minimum Distance Separation II calculation form.</i> | | | | | |
| Is the proposed construction creating a new operation or expanding an existing operation with greater than 5 Nutrient Units? | | | | | |
| <i>If yes, provide a copy of the OMAFRA approved Nutrient Management Strategy. If no, skip to section 6.</i> | | | | | |
| Is the proposed construction creating a new operation or expanding an existing operation with greater than or equal to 300 Nutrient Units? | | | | | |
| <i>If yes, provide a copy of the OMAFRA approved Nutrient Management Strategy and Plan.</i> | | | | | |

| | | |
|--|--------------------------|----|
| 6. Lot Grading Approval | Yes | No |
| Does the proposed construction include a roofed structure greater than 10 sq. m. (108 sq. ft.)? | | |
| Does the proposed construction alter existing lot grading? | | |
| Does the proposed construction alter existing surface drainage on the lot? | | |
| <i>If yes to any of the above, provide either a lot grading plan bearing the signature and seal of a Professional Engineer, Landscape Architect, or Ontario Land Surveyor or an approved Lot Grading Exemption form from the Township of Malahide Physical Services Department.</i> | | |
| 7. Additional Road Entrance | Yes | No |
| Does the proposed construction require an additional road entrance? | | |
| <i>If yes, provide a copy of the approved permit from the MTO (Highway #3), County of Elgin (County Roads) or the Township of Malahide Physical Services Department in all other cases.</i> | | |
| 8. Conservation Authority | Yes | No |
| Does the proposed construction fall within a Conservation Authority regulated area? | | |
| <i>If yes, provide a copy of the Conservation Authority issued permit.</i> | | |
| 9. MTO (Ministry of Transportation of Ontario) | Yes | No |
| Does the proposed construction fall within the MTO regulated area (Highway #3)? | | |
| <i>If yes, provide a copy of the MTO issued permit.</i> | | |
| 10. Municipal Drains | Yes | No |
| Is there a municipal drain or natural water course within 45m (148ft) of the subject property? | | |
| <i>If yes, provide drain name: _____ and show location on lot grading plan/site plan.</i> | | |
| 11. Municipal Water/Waste Water | Yes | No |
| Are any of the buildings located on the subject property connected to municipal water or waste water? | | |
| <i>If yes, please apply for connection permits through the Township of Malahide Physical Services Department.</i> | | |
| 12. Declaration of applicant | | |
| <p>I, _____ certify that:</p> <p style="text-align: center;">(print name)</p> <ol style="list-style-type: none"> The information contained in this application, attached schedule, attached plans and specifications, and other attached documentation is true to the best of my knowledge. Owner/contractor is required to ensure compliance to all federal, provincial and municipal legislation and or regulations prior to, during and after construction. The Township of Malahide cannot be held liable for any actions by the owner/contractor resulting in; non issuance of a permit, revoking of a permit, legal action and or possible fine. I have authority to bind the corporation or partnership (if applicable). | | |
| _____ | _____ | |
| (Date) | (Signature of Applicant) | |
| <i>Personal Information contained in this form and schedule 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 the Chief Building Official.</i> | | |

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 (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 <i>Ontario New Home Warranties Plan Act</i> ? If no, go to section G. | | | Yes | No |
| ii. Is registration required under the <i>Ontario New Home Warranties Plan Act</i> ? | | | Yes | 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). 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., 2nd Floor. Toronto, M5G 2E5 (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] | | | |
| <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 | | | |
| D. Declaration of Designer | | | |
| 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 3.2.4. of Division C, 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 and am qualified in the appropriate category as an "other designer" under subsection 3.2.5. of Division C, 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 submitted this application with the knowledge and consent of the firm. | | | |
| _____ | _____ | | |
| Date | Signature of Designer | | |

NOTE:

1. For the purposes of this form, "individual" means the "person" referred to in Clause 3.2.4.7(1) d) 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 authorization, 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 Association of Professional Engineers of Ontario.

COMMITMENT TO GENERAL REVIEW BY ARCHITECT AND ENGINEER

PART A – TO BE COMPLETED BY OWNER

Project Description:

Permit Application No.

Address of Project:

Municipality:

WHEREAS the building code requires that the project described above be designed and reviewed during construction or demolition by an architect, a professional engineer or both that are licensed to practice in Ontario, and

WHEREAS Ontario law prohibits the construction or demolition of a building if a permit has not been issued to authorize it, and

WHEREAS architects and engineers are prohibited by law from undertaking general review of construction if a permit has not been issued,

NOW THEREFORE the Owner, who intends to construct or demolish or have the building constructed or demolished, hereby confirms that:

1. The undersigned architect and/or professional engineers have been retained to provide general review of the construction or demolition of the building to determine whether the work is in general conformity with the plans and other documents that form the basis for the issuance of a permit, in accordance with the performance standards of the Ontario Association of Architects (OAA) and/or Professional Engineers Ontario (PEO);
2. All general review reports by the architect and/or professional engineers will be forwarded to the Chief Building Official;
3. Should any retained architect or professional engineer cease to provide general review for any reason during construction or demolition, the Chief Building Official will be notified in writing immediately, and another architect or engineer will be appointed so that general review continues without interruption; and
4. Construction or demolition will only be undertaken if an architect and/or professional engineers are retained to undertake general review, and a permit authorizing the proposed construction or demolition has been issued.

The undersigned hereby certifies that he/she has read and agrees to the above

Owner's Name:

Date:

Owner's Address:

Telephone:

Signature of Owner:
(or authorized agent)

Print Name:

Fax:

Coordinator of the work of all consultants:

Telephone:

Address:

Fax:

PART B – TO BE COMPLETED BY CONSULTANTS

The undersigned architect and/or professional engineers hereby certify that they have been retained to provide general review of the parts of construction or demolition of the building indicated, to determine whether the work is in general conformity with the plans and other documents that form the basis for the issuance of a permit, in accordance with the performance standards of the OAA and/or PEO.

| | | | | | |
|----------------------|-------------------|-------------------|-------------------|----------------------|---------------------|
| ARCHITECTURAL | STRUCTURAL | MECHANICAL | ELECTRICAL | SITE SERVICES | OTHER: _____ |
| Consultant Name: | | Signature: | Print Name: | | Date: |

Telephone:

Address:

| | | | | | |
|----------------------|-------------------|-------------------|-------------------|----------------------|---------------------|
| ARCHITECTURAL | STRUCTURAL | MECHANICAL | ELECTRICAL | SITE SERVICES | OTHER: _____ |
| Consultant Name: | | Signature: | Print Name: | | Date: |

Telephone:

Address:

| | | | | | |
|----------------------|-------------------|-------------------|-------------------|----------------------|---------------------|
| ARCHITECTURAL | STRUCTURAL | MECHANICAL | ELECTRICAL | SITE SERVICES | OTHER: _____ |
| Consultant Name: | | Signature: | Print Name: | | Date: |

Telephone:

Address:

| | | | | | |
|----------------------|-------------------|-------------------|-------------------|----------------------|---------------------|
| ARCHITECTURAL | STRUCTURAL | MECHANICAL | ELECTRICAL | SITE SERVICES | OTHER: _____ |
| Consultant Name: | | Signature: | Print Name: | | Date: |

Telephone:

Address: