87 John Street South Aylmer, On N5H 2C3 Telephone: 519-773-5344 Fax: 519-773-5334 www.malahide.ca



## **Zoning Compliance Form**

Township of Ma	alahide Use Only					
Address of Proje	ect:					
Roll Number:						
Date Received:						
1. Zoning Com	pliance					
To obtain prope	rty zoning informat		.ca, see the Township of M	lalahide Zonir	ng By-law	
or contact the To	ownship of Malahid	de Building Departmen				
Property Zonin	ıg:	Proposed use	e of building:			
Building Size	Width	Length	Height	Area		
Lot Size	Frontage	Depth	Lot Area	Lot Coverag	ge %	
Required Setbacks	Side Yard	Side Yard	Front Yard	Rear Yard		
Setbacks Provided	Side Yard	Side Yard	Front Yard	Rear Yard	Rear Yard	
2. Site Plan Co	ntrol or Zoning A	mendment	·	Yes	No	
Is this applicatio	n conditional on sit	e plan control or a zor	ning amendment?			
If yes, provide c	onfirmation of appr	oval.				
3. Livestock or	r Non-Livestock R	elated Construction		Yes	No	
Is the proposed	construction livesto	ock related?				
If no, move to se	ection 4. If yes, skip	o to section 5.				
4. Non-Livesto	ck Related Const	ruction Only		Yes	No	
Are there any st proposed structu		f housing livestock wit	hin 750m (2460ft) of this			
	Minimum Distance stion skip to section		ion form and skip to sectio	n 6.		
5. Livestock Ro	elated Construction	on Only		Yes	No	
Are there any re related structure		s within 750m (2460ft)	of this proposed livestock			
If yes, provide a	Minimum Distance	e Separation II calcula	tion form.			
	construction creati reater than 5 Nutrie		r expanding an <b>existing</b>			
If yes, provide a If no, skip to sec		RA approved Nutrient	Management Strategy.	•	•	
Is the proposed	construction creati	ng a <b>new</b> operation <u>or</u> al to <b>300</b> Nutrient Units	r expanding an <b>existing</b> s?			
			t Management Strategy an	d Plan.		

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?		
If yes to any of the above, provide either a lot grading plan bearing the signature and Professional Engineer, Landscape Architect, or Ontario Land Surveyor <u>or</u> an approve Exemption form from the Township of Malahide Physical Services Department.		ing
7. Additional Road Entrance	Yes	No
Does the proposed construction require an additional road entrance?		
If yes, provide a copy of the approved permit from the MTO (Highway #3), County of or the Township of Malahide Physical Services Department in all other cases.	Elgin (Coun	ity Roads)
8. Conservation Authority	Yes	No
Does the proposed construction fall within a Conservation Authority regulated area?		
If yes, provide a copy of the Conservation Authority issued permit.		
9. MTO (Ministry of Transportation of Ontario)	Yes	No
Does the proposed construction fall within the MTO regulated area (Highway #3)?		
If yes, provide a copy of the MTO issued permit.		
10. Municipal Drains	Yes	No
Is there a municipal drain or natural water course within 45m (148ft) of the subject property?		
If yes, provide drain name:a.  lot grading plan/site plan.	nd show loo	ation on
11. Municipal Water/Waste Water	Yes	No
Are any of the buildings located on the subject property connected to municipal water or waste water?		
If yes, please apply for connection permits through the Township of Malahide Physical Department.	al Services	
12. Declaration of applicant		
I,	_ certify that	t:
<ol> <li>(print name)</li> <li>The information contained in this application, attached schedule, attached plans and sattached documentation is true to the best of my knowledge.</li> <li>Owner/contractor is required to ensure compliance to all federal, provincial and munic regulations prior to, during and after construction. The Township of Malahide cannot actions by the owner/contractor resulting in; non issuance of a permit, revoking of a pror possible fine.</li> <li>I have authority to bind the corporation or partnership (if applicable).</li> </ol>	ipal legislation be held liable	on and or e for any
(Date)  (Signature of Applicant)  Personal Information contained in this form and schedule is collected under the authority of sur Building Code Act, 1992, and will be used in the administration and enforcement of the Building Questions about the collection of personal information may be addressed to the Chief Building	g Code Act,	

## 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 Autho	rity						
Application number:			Permit r	Permit number (if different):			
Date received:			Roll nur	mber:			
	Name of municipalit	ty, upper-tier m	unicipality, bo	ard of health or con	nservatior	n 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	า^์)		
B. Purpose of application							
New construction	Addition t existing bui	lding	Alteratio	•	[	Demolition	Conditional Permit
Proposed use of building		Cu	ırrent use of	building			
Description of proposed work							
C. Applicant	Applicant is:	Owner o	or Au	uthorized agent of			
Last name		First name		Corporation or p	partners	hip	
Street address						Unit number	Lot/con.
Municipality		Postal code	•	Province		E-mail	
Telephone number		Fax				Cell number	
D. Owner (if different from	n applicant)						
Last name	,,	First name		Corporation or p	partners	hip	
Street address		1				Unit number	Lot/con.
Municipality		Postal code		Province		E-mail	•
Telephone number		Fax				Cell number	

E. Builder (optional)						
· · · · · · · · · · · · · · · · · · ·		Corporation or partnersh	ership (if applicable)			
Street address			Unit number	Lot/con.		
Municipality	Postal code	Province	E-mail			
Wallopality	ricipality Fostal code Flovince			L-man		
Telephone number	Fax		Cell number	Il number		
F. Tarion Warranty Corporation (Ontario						
i. Is proposed construction for a new home as defined in the Ontario New Home Warranties Plan Act? If no, go to section G.				s No		
ii. Is registration required under the Ontar	io New Home Warrar	nties Plan Act?	Yes	s No		
iii. If yes to (ii) provide registration number	(s):					
G. Required Schedules		9 99 8 1 1 2 21 52				
i) Attach Schedule 1 for each individual who rev	•					
ii) Attach Schedule 2 where application is to con	struct on-site, install o	or repair a sewage system.				
H. Completeness and compliance with a	pplicable 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).	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				s No		
application is made.						
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>				s No		
iii) This application is accompanied by the information and documents prescribed by the applicable by-				s No		
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.						
iv) The proposed building, construction or demol	iv) The proposed building, construction or demolition will not contravene any applicable law.  Yes  No					
I. Declaration of applicant			_			
(print name)			de	clare that:		
(1						
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.						
2. If the owner is a corporation of partifership, I have the authority to bind the corporation of partifership.						
Date	Signotur	e of applicant		_		
Date	Signature	ε οι αμμιτατιί				

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 Lot/con. Unit no. Municipality Postal code Plan number/ other description B. Individual who reviews and takes responsibility for design activities Name Firm Unit no. Street address 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 C1** ☐ House ■ HVAC – House **Building Structural** ■ Building Services ■ Small Buildings ☐ 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 \_\_\_\_\_ declare that (choose one as appropriate): (print name) ☐ 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: ☐ 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: ☐ 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.

## NOTE:

Date

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.

Signature of Designer

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.