



**MULTI FAMILY/LARGE BUILDINGS/PART 3/PART 9
BUILDING PERMIT Application Form**
This is NOT a Building Permit

Date of Application

New Alteration Relocation
Repair Addition

PROJECT INFORMATION	Building Address (include Unit #)	Legal Description Lot Block Plan	Value of Construction \$
	Description of work	Existing Use	Proposed Use
	Phased Permit: YES <input type="checkbox"/> NO <input type="checkbox"/> if Yes, please circle FOUNDATION/SHELL/FINAL/OTHER _____		# of Units
	Tenant Improvements – Provide contact name, company name & address for tenant if tenant is not the applicant:		Phone Number:

PROPERTY OWNER	Contact Name/Company Name		Email:		
	Address		City	Province	Postal Code
	Phone Number	Fax Number	Cell		
	SIGNATURE OF REGISTERED OWNER:		x		

APPLICANT	Contact Name/Company Name		Email:		
	Address		City	Province	Postal Code
	Phone Number	Fax Number	Cell		
	-	-	-		

CONTRACTOR	Contact Name/Company Name		Email:		
	Address		City	Province	Postal Code
	Phone Number	Fax Number	Cell		
	-	-	-		

SUBMISSION REQUIREMENTS

3 COMPLETE SETS ROLL PLANS REQUIRED FOR ALL PERMIT APPLICATIONS		Submitted	Received (office use only)
	2 copies – Building Dept 1 copy – Public Health		
Development Plan	Copy of approval for development from City Planner	<input type="checkbox"/>	<input type="checkbox"/>
Site Plan/Key Plan	Required for ALL PERMIT APPLICATIONS	<input type="checkbox"/>	<input type="checkbox"/>
Architectural/Floor Plans	Required for ALL PERMIT APPLICATIONS	<input type="checkbox"/>	<input type="checkbox"/>
Building Code Analysis	Required for new buildings, additions, change in occupancy	<input type="checkbox"/>	<input type="checkbox"/>
Structural	Required for new buildings, additions, structural alterations	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical/Ventilation	Required for new buildings, additions, mechanical alterations	<input type="checkbox"/>	<input type="checkbox"/>
Electrical	Required for new buildings, additions, electrical alterations	<input type="checkbox"/>	<input type="checkbox"/>
Pre-Eng Bldg Drawings	Required for all pre-engineered building systems	<input type="checkbox"/>	<input type="checkbox"/>
Fire Protection Drawings	Required for new fire protection systems or additions to existing systems	<input type="checkbox"/>	<input type="checkbox"/>



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PROFESSIONAL DESIGN

ARCHITECTURAL	Contact Name/Company Name		Email:		
	Address		City	Province	Postal Code
	Phone Number	Fax Number	Cell		

STRUCTURAL	Contact Name/Company Name		Email:		
	Address		City	Province	Postal Code
	Phone Number	Fax Number	Cell		

MECHANICAL	Contact Name/Company Name		Email:		
	Address		City	Province	Postal Code
	Phone Number	Fax Number	Cell		

SUBTRADE (attach separate sheet if required)	Contact Name/Company Name		Email:		
	Address		City	Province	Postal Code
	Phone Number	Fax Number	Cell		

PROFESSIONAL DESIGN REQUIREMENTS		Submitted	Received (office use only)
Sealed Drawings	Required for all systems outside scope of Part 9 of the NBC	<input type="checkbox"/>	<input type="checkbox"/>
Commitment for field review	Required for projects involving work under Part 3 of the NBC	<input type="checkbox"/>	<input type="checkbox"/>

DECLARATION AND SIGNATURES: to be completed for ALL BUILDING PERMIT APPLICATIONS

I hereby acknowledge that I have read this application and state that the information contained herein is correct and agree to comply with all City of Yorkton Bylaws and/or Provincial laws regulating Building and Occupancy and all Building Code Requirements. The issuance of a building permit does not relieve the owner and authorized agents from complying with the requirements of the National Building Code of 2010, as amended and within the scope of *The Uniform Building and Accessibility Standards Act*. I further declare that the submission of this application does not give permission to begin work on this project.

Applicant Signature

Date

The personal information being collected on this form is for the purpose of processing and acting upon this application in accordance with City of Yorkton Building Bylaw 16/2012, and is protected by the privacy provisions of *The Local Authority Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection, use and disclosure of your personal information in this process, please contact the City Clerk for the City of Yorkton at 306-786-1717.