



**SINGLE FAMILY/SEMI DETACHED/SMALL PROJECTS  
BUILDING PERMIT Application Form**  
**This is NOT a Building Permit**

**Date of Application:**

New     Alteration     Demolition   
 Repair     Addition     Rental/Secondary Suite

<b>PROJECT INFORMATION</b>	Building Address (include Unit #)	Legal Description Lot          Block          Plan	Value of Construction \$
	Description of work	Existing Use	Proposed Use
	Construction of One & Two Family Dwelling Units: <span style="float: right;">Basement Development    Yes <input type="checkbox"/>    No <input type="checkbox"/>    With Secondary suite    Yes <input type="checkbox"/>    No <input type="checkbox"/></span> <span style="float: right;">Deck Construction    Yes <input type="checkbox"/>    No <input type="checkbox"/>    RTM Construction    Yes <input type="checkbox"/>    No <input type="checkbox"/></span>		

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

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

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

**SUBMISSION REQUIREMENTS:**

2 COMPLETE SETS OF PLANS REQUIRED FOR ALL PERMIT APPLICATIONS		Submitted	Received (office use only)
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"/>
Structural	Required for new buildings, additions, structural alterations	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical	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"/>

**RETURN to CITY OF YORKTON BUILDING SERVICES DEPARTMENT 2<sup>nd</sup> Floor, 37 Third Avenue North, Yorkton, SK S3N 2W3**  
**Tel (306) 786-1710      Fax (306) 786-6880      Email: [buildingservices@yorkton.ca](mailto:buildingservices@yorkton.ca)      [www.yorkton.ca](http://www.yorkton.ca)**



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**PROFESSIONAL DESIGN**

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

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

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

<b>SUBTRADE</b> (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.

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