

TOWNSHIP OF LAKE OF THE WOODS

BUILDING CODES & PERMITS INFORMATION SHEET

OVERVIEW:

The Ontario Building Code is a regulation made under the *Building Code Act*, which, by law, must be enforced by all municipalities.

The Code is essentially a set of minimum provisions respecting the safety of buildings with reference to public health, fire protection and structural sufficiency. Its primary purpose is the promotion of public safety through the application of appropriate uniform building standards.

BUILDING PERMITS:

A Building Permit is a license issued by a municipality which grants legal permission to begin a construction project. Permits are typically required for new building(s), additions, prefabricated structures and alterations to heating, ventilation, air-conditioning (HVAC) and plumbing systems, and some renovations.

It is unlawful to start a building project without having first obtained a Building Permit.

APPLYING FOR A BUILDING PERMIT:

1. Ensure that your project complies with the municipality's Zoning By-Law(s) - which regulate the use, size, required setbacks, etc., of land and buildings - and with other applicable law, regulations and policies of various Ministries and agencies (i.e. MNR, MTO, Hydro One, Northwestern Health Unit), New Home Warranty, etc. If you have questions or require further information or clarification, contact Chief Building Official Frank Berg at his home 852-1177.
2. You require a permit from MTO building within 45 metres of a Provincial Hwy & within 180m of the centre point of an intersection with a King's Hwy or 395m of an intersection of a Controlled Access Highway.
3. Fill out all applicable areas of the Application Form. Sign and date the form in the areas indicated.
4. Adequate drawings and related information which clearly show the building's structure and services as well as the location of all buildings and services on the property must be provided with your: application.
5. Submit the completed application form together with the drawings, information and required fee (see below) to the municipality for review by the Chief Building Official.
6. Keep the municipality informed as your project progresses so appropriate inspections can be done. Remember, it is your responsibility to call for inspections to ensure Code compliance.

Local Approval Agencies:

Northwestern Health Unit (Fort Frances).....	807-274-9827
Ministry of Natural Resources (Fort Frances).....	807-274-5337
Ministry of Transportation (MTO Emo).....	807-482-1362
Ministry of Labour (Dryden).....	807-223-4898
Electrical Safety Authority.....	877-372-7233
Township of Lake of the Woods.....	807-852-3529

<u>LAKE OF THE WOODS FEE SCHEDULE:</u> Minimum Fee.....	\$50.00
Base fee for first \$1000.....	\$50.00
Each Additional \$1000 of value or part thereof.....	\$7.00
Demolition permits fee.....	\$0

Calculation of building value Main Floor \$100/sq ft, Second Floor \$50/sq ft, Finished Basement \$25/sq ft. Unfinished basement \$20/sq ft, Garage & Accessory bldg \$20/sq ft., Barns or livestock bldg \$5/sq ft.

Township of Lake of the Woods Application for a Permit to Construct or Demolish

This form is authorized under subsection 8(1.1) of the Building Code Act.

For use by Principal Authority			
Application number:		Permit number (if different):	
Date received:		Roll number:	
<p>Application submitted to: Township of Lake of the Woods <small>(Name of municipality, upper-tier municipality, board of health or conservation authority)</small></p>			
A. Project information			
Building number, street name		Unit number	Lot/con.
Municipality Township of Lake of the Woods	Postal code	Plan number/other description	
Project value est. \$		Area of work (m ²)	
B. Purpose of application			
<input type="checkbox"/> New construction <input type="checkbox"/> Addition to an existing building <input type="checkbox"/> Alteration/repair <input type="checkbox"/> Demolition <input type="checkbox"/> Conditional Permit			
Proposed use of building		Current use of building	
Description of proposed work			
C. Applicant			
Applicant is: <input type="checkbox"/> Owner or <input type="checkbox"/> 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.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
ii. Is registration required under the <i>Ontario New Home Warranties Plan Act</i> ?	<input type="checkbox"/> Yes	<input 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). 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.	<input 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 <i>Building Code Act, 1992</i> .	<input 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 <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.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
iv) The proposed building, construction or demolition will not contravene any applicable law.	<input type="checkbox"/> Yes	<input type="checkbox"/> 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 Township of Lake of the Woods	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): <div style="text-align: center;">(print name)</div>			
<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	

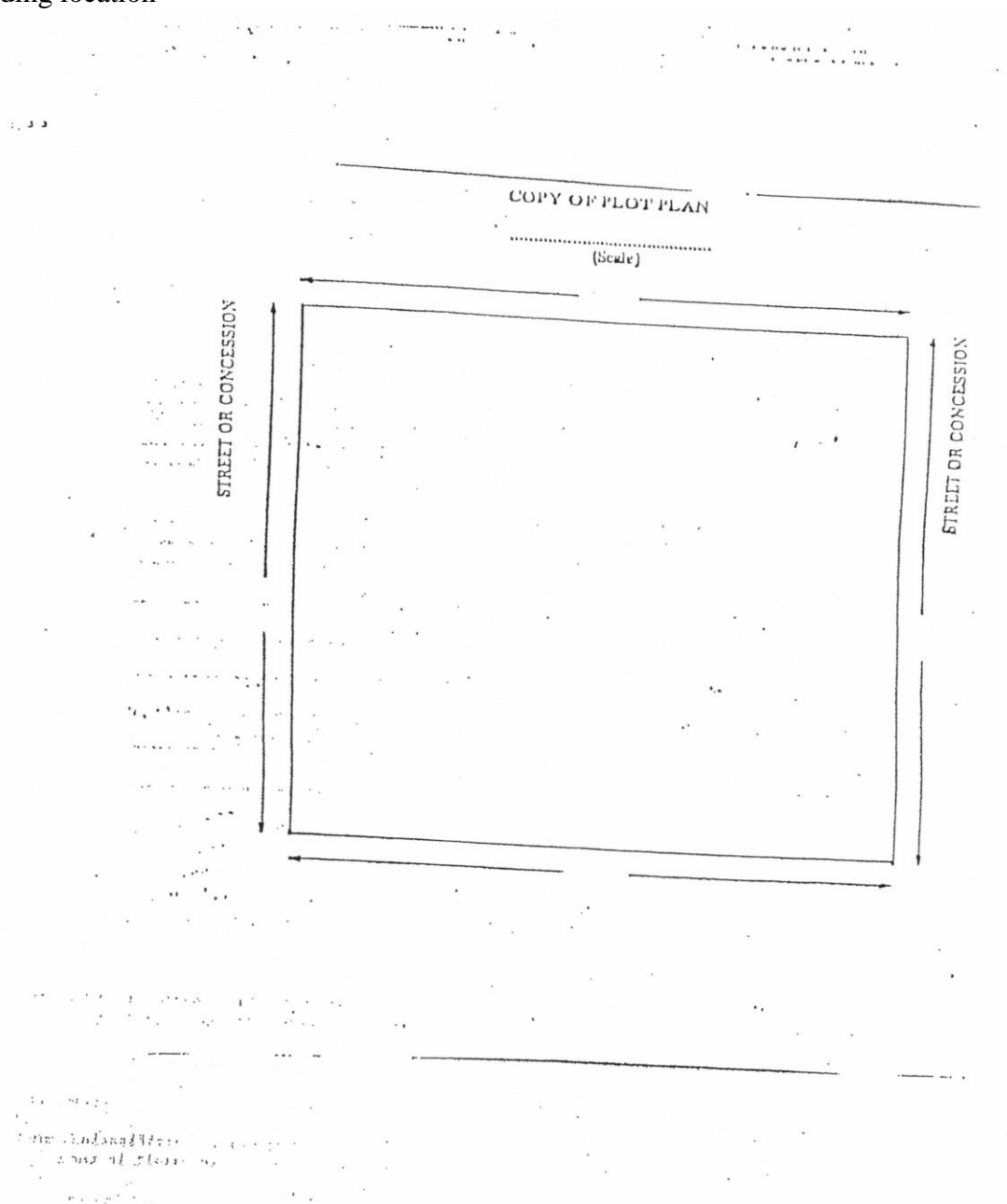
NOTE:

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 practice, 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.

Schedule 2: Sewage System Installer Information

A. Project Information			
Building number, street name		Unit number	Lot/con.
Municipality	Postal code	Plan number/ other description	
B. Sewage system installer			
Is the installer of the sewage system engaged in the business of constructing on-site, installing, repairing, servicing, cleaning or emptying sewage systems, in accordance with Building Code Article 3.3.1.1, Division C?			
<input type="checkbox"/> Yes (Continue to Section C)		<input type="checkbox"/> No (Continue to Section E)	<input type="checkbox"/> Installer unknown at time of application (Continue to Section E)
C. Registered installer information (where answer to B is "Yes")			
Name		BCIN	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number ()	Fax ()		Cell number ()
D. Qualified supervisor information (where answer to section B is "Yes")			
Name of qualified supervisor(s)		Building Code Identification Number (BCIN)	
E. Declaration of Applicant:			
<p>I _____ declare that:</p> <p style="margin-left: 40px;">(print name)</p> <p><input type="checkbox"/> I am the applicant for the permit to construct the sewage system. If the installer is unknown at time of application, I shall submit a new Schedule 2 prior to construction when the installer is known;</p> <p><u>OR</u></p> <p><input type="checkbox"/> I am the holder of the permit to construct the sewage system, and am submitting a new Schedule 2, now that the installer is known.</p> <p>I certify that:</p> <ol style="list-style-type: none"> 1. The information contained in this schedule 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. <p style="margin-top: 20px;">_____</p> <div style="display: flex; justify-content: space-between; width: 80%; margin-left: auto; margin-right: auto;"> Date Signature of applicant </div>			

Show building location

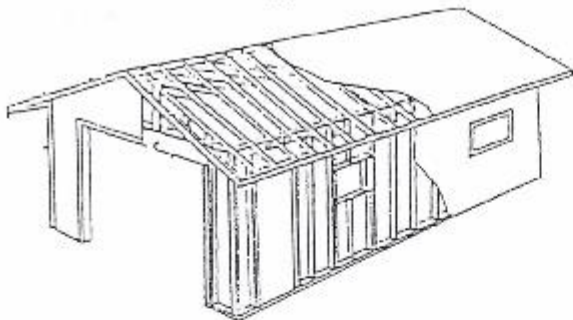


City of Chicago
Department of Public Works
Office of Construction Management

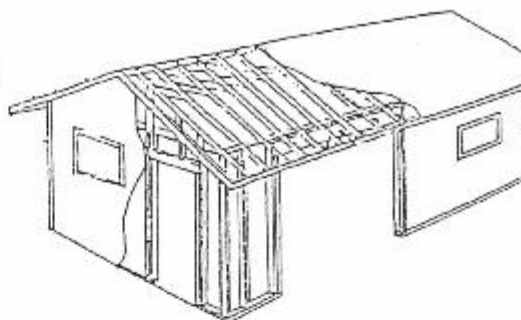
FOR OFFICE USE ONLY	
ROLL NO. _____	TYPE OF WORK _____
NATURE OF CONSTRUCTION _____	TYPE OF STRUCTURE _____

ACCESSORY BUILDINGS & DETACHED GARAGES

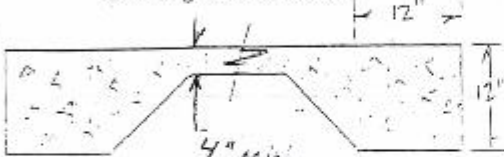
Type "A"



Type "B"

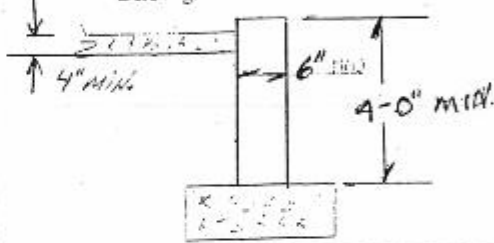


Slab on ground foundation:



Slabs on ground shall be reinforced with a minimum of:-
 2x 15mm rebar in slab footing
 #10 mm rebar @ 24"oc each way in slab
 #5 "X 6" X 6-6 W/FM may be substituted in slab area)

Below grade foundation



WIDTH _____ LENGTH _____

EAVES _____

HEIGHT: wall _____ peak _____

SET BACKS, left _____ right _____

 Front _____ rear _____

PITCH OF ROOF _____

construction details

walls; 2 X _____ @ _____" on centre
 prefab trusses @ _____" on centre

OR

rafters 2 X _____ @ _____" on centre with cross ties
 with ceiling joists 2 X _____" @ _____" on centre
 wall sheathing; _____" plywood or _____" OSB
 roof sheathing; _____" plywood or _____" OSB
 over head door width; _____
 over head door lintel; _____

(Engineered beam may be required for supported lengths greater than 4.9 meters or door openings greater than 4.21 meters)

General Zoning Requirements for Accessory Buildings
(detached garages)

- shall not be used for human habitation
- shall not be built closer to the front lot line than the minimum distance required by By-Law _____ as amended for the principal building on lot.
- shall not be built within 2 meters of the principal building
- if built on a corner lot, shall be located in the rear yard and not in the exterior side yard adjacent to the flanking street
- shall not be built closer to the street than the principal building on the lot.
- shall not be built closer than 1 meter to a lot line or 1.5 meters to a lane
- shall not exceed 15% coverage of the total lot area
- shall not be considered as an accessory building if attached to the principal building in any way
- may not be constructed prior to construction of the principal building

Owner/Applicant

name; _____

address; _____

Permit #; _____

X _____
 (signature of owner/applicant)