

Township of Edwardsburgh/Cardinal

www.edwardsburghcardinal.ca

P.O. BOX 129,
18 CENTRE ST.
SPENCERVILLE, ONT.
K0E 1X0

PHONE: 613-658-3055
FAX: 613-658-3445
TOLL FREE: 866-848-9099
E-MAIL: mail@twpec.ca

Requirements to Obtain a Building Permit

All applicants must provide the following information, as applicable.

1. A completed application form. (Boxes A, B, C, D & E if applicable, F and I)
2. Proof of ownership. (New home development only. Copy of Deed or Tax Bill)
3. Sufficient drawings, specifications and documents as deemed necessary to determine compliance with the Ontario Building Code and other applicable laws. Chief Building Official to determine what drawings are necessary.
4. Septic system permit from the Health Unit: [613-345-5685](tel:613-345-5685)
5. Entrance permit: County-Jeff Stone: [613-802-0142](tel:613-802-0142) or Township-Dan Belleau: [613-349-9296](tel:613-349-9296)
6. Site plan drawing depicting lot lines, location of buildings, building setback measurements, location of proposed well and septic, proximity to existing agricultural structures if applicable.
7. Proposed lot grading plan.
8. Tarion new home warranty registration if applicable.
9. Payment of all fees for building, entrance, 911 sign, water and sewer or other possible planning or admin charges as applicable.
10. Please note that depending on soil conditions a report from a qualified geotechnical engineer may be required prior to any building taking place.

Any further questions regarding building or zoning matters can be directed to Jason Vezina, Chief Building Official at 613-658-3055 or jvezina@twpec.ca

Mailboxes shall be erected at the rounding of the shoulder such that the opening of the mailbox is at the outside edge of the shoulder. The bottom of the box shall not be less than 40" above the level of the shoulder to permit the passage of the plow wing below the box. The post shall be no closer than 16'6" to the centre of the road.



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Building Permits

What is a Building Permit?

A Building Permit is a license which grants legal permission to undertake the construction, alteration, repair or change of use of a building or structure, on private property.

Requirements for Permits

Building Permits are typically required for the following:

- New Buildings
- Additions to Existing Buildings
- Repair, Renovation and Alteration of Existing Buildings
- Prefabricated and Relocated Buildings
- Building Systems (heating, fire protection, etc.)
- Various Structures (decks, retaining walls, towers, pools, etc.)
- Installation of Plumbing, Drains and Sewers
- Demolition
- Change of Use of a Building

Check with your local Building Department for specific requirements and details.

The Purpose of Permits

The permit process involves the examination of the plans and details of construction projects against the requirements of the Ontario Building Code and applicable laws, followed by the inspection at various stages of construction of the project. The plan examination and inspection by the staff of the municipal Building Department is undertaken to reduce the risk to the health and safety of the public and the people who use and occupy buildings.

Permits are an essential part of Code enforcement. All of us have a major investment in our home or business, which we may wish to construct or renovate. When that home or business does not comply with the Code or other requirements, then the value of our investment could be reduced, and it is possible that we, our family and the other occupants could be at risk if there is improper construction. Obtaining a permit helps to protect that investment and reduce the risk of improper or unsafe construction.

Why bother with a permit?

There are several good reasons including:

- ✓ The Building Permit process helps you to understand, not only what the Ontario Building Code requires, but also the other local requirements, such as zoning, which apply to your particular project.
- ✓ Building Permits provide the means for the local building officials to review the design and to inspect the construction, against the requirements of the Code, other applicable laws and local bylaws.
- ✓ Building Permits provide the means for the local building officials to ensure minimum standards are met and thus help to reduce the risks to the health and safety of the public and building occupants.
- ✓ It's the law...

When is a Building Permit Required?

You must obtain a building permit before you do any of the following:

- ✓ Construct a new building
- ✓ Installation of a swimming pool
- ✓ Renovate, repair or add to a building
- ✓ Demolish or remove all or a portion of a building
- ✓ Change a building's use
- ✓ Install, change or remove partitions and load-bearing walls
- ✓ Make new opening for, or change the size of, doors and windows
- ✓ Build a garage, balcony or deck or enclose an existing deck
- ✓ Build a building over 108sq.ft. (10sq.m.)
- ✓ Construct a foundation
- ✓ Install or modify any life safety or fire suppression system such as fire alarms, sprinkler or standpipe or fixed extinguishing systems
- ✓ Install or modify heating, plumbing and air conditioning systems, fireplaces, fireplace inserts and woodstoves
- ✓ Install or renovate plumbing
- ✓ Finish a basement or convert a room to a bedroom.

You do not require a building permit to:

- ✓ Replace existing, same-size doors and windows, subject to distance from property lines
- ✓ Install siding
- ✓ Build a building under 108sq.ft. (10sq.m.), but must conform to the zoning setbacks
- ✓ Re-shingle a roof, provided there is no structural work
- ✓ Install eavestroughs, provided that drainage is contained on your property
- ✓ Damp-proof basements

- ✓ Paint or decorate, including interior finishes, but excluding insulation
- ✓ Reinstall/replace kitchen or bathroom cupboards without plumbing

Drawing Requirements

Along with the fully completed Building Permit, Application Forms, two (2) copies of the following drawings are required to be submitted:

- Site Plan
- Floor Plans
- Exterior Elevations
- Cross Sections
- Mechanical Drawings

Site Plans must be dimensioned in metric units. All other plans must be drawn to scale and fully dimensioned in either metric or imperial units.

Site Plan

A Site Plan shows the location of the proposed construction and any other accessory structures in relation to the property lot lines. The following information shall be included on the Site Plan:

- ✓ Scale (metric only)
- ✓ Direction (north arrow)
- ✓ Municipal address
- ✓ Legal description (lot and plan numbers)
- ✓ Existing buildings and accessory structures (pools, sheds, etc)
- ✓ Dimensioned property lines with setbacks to all new and existing structures
- ✓ Proposed construction
- ✓ Overall building dimensions
- ✓ Rights-of-way and easements
- ✓ Landscaped areas and hard surfaces such as driveways
- ✓ Site Statistics (lot area, coverage, gross floor area, height, etc)

Calling for Inspections

Inspection Requirements

- ✓ Construction must start within 6 months from the date the Building Permit was issued.
- ✓ The homeowner or the contractor must notify the Building department at certain stages of construction.
- ✓ The Building Permit must be posted on site and associated drawings must be kept and maintained on the site of construction at all times.

Required Inspections

- Footings
 - ✓ Prior to pouring concrete
- Foundation
 - ✓ Prior to backfilling, to view drain tile, sump pit, water proofing or damp proofing
- Framing
 - ✓ Includes roof framing, wall framing both structure & non-structure, rough plumbing, HVAC systems
- Insulation
 - ✓ Includes insulation, vapour barrier windows and doors
- Final Inspection
 - ✓ Prior to occupancy to view smoke/CO2 alarms, heating, hot water, bathroom group (toilet, sink, shower or bathtub), guards and handrails and means of egress.

Further information can be obtained by contacting the Chief Building Inspector at 613-658-3055.

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:	
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			
<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			Unit no.	Lot/con.
Building number, street name				
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.

Schedule 2: Sewage System Installer Information

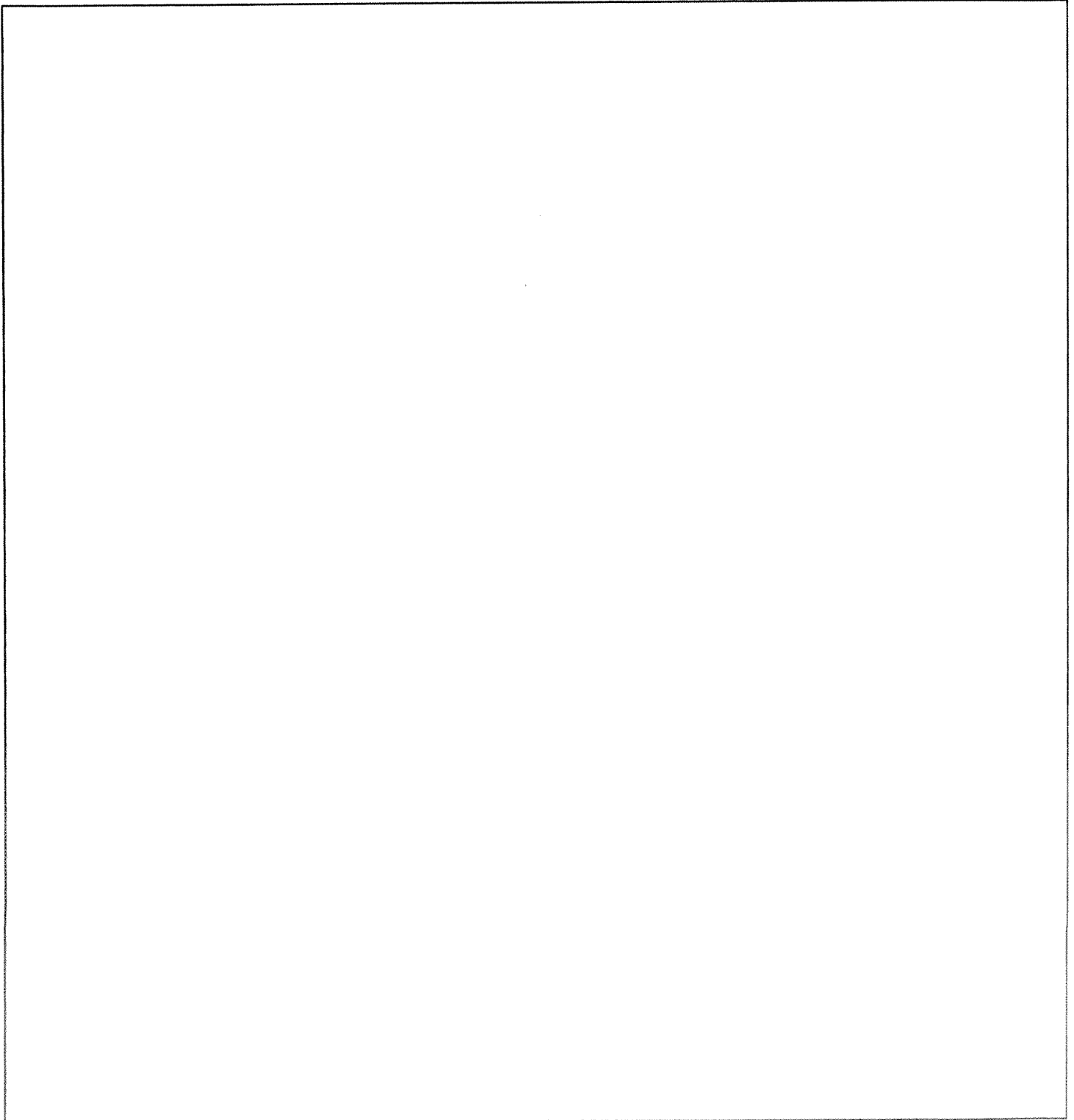
A. Project Information			
Building number, street name			Unit number
			Lot/con.
Municipality	Postal code	Plan number/ other description	
B. Sewage system installer			
Is the installer of the sewage system engaged in the business of constructing on-site, installing, repairing, servicing, cleaning or 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:			
I _____ declare that:			
(print name)			
<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;			
<u>OR</u>			
<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.			
I certify that			
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.			
_____		_____	
Date		Signature of applicant	

BUILDING PERMIT SITE PLAN

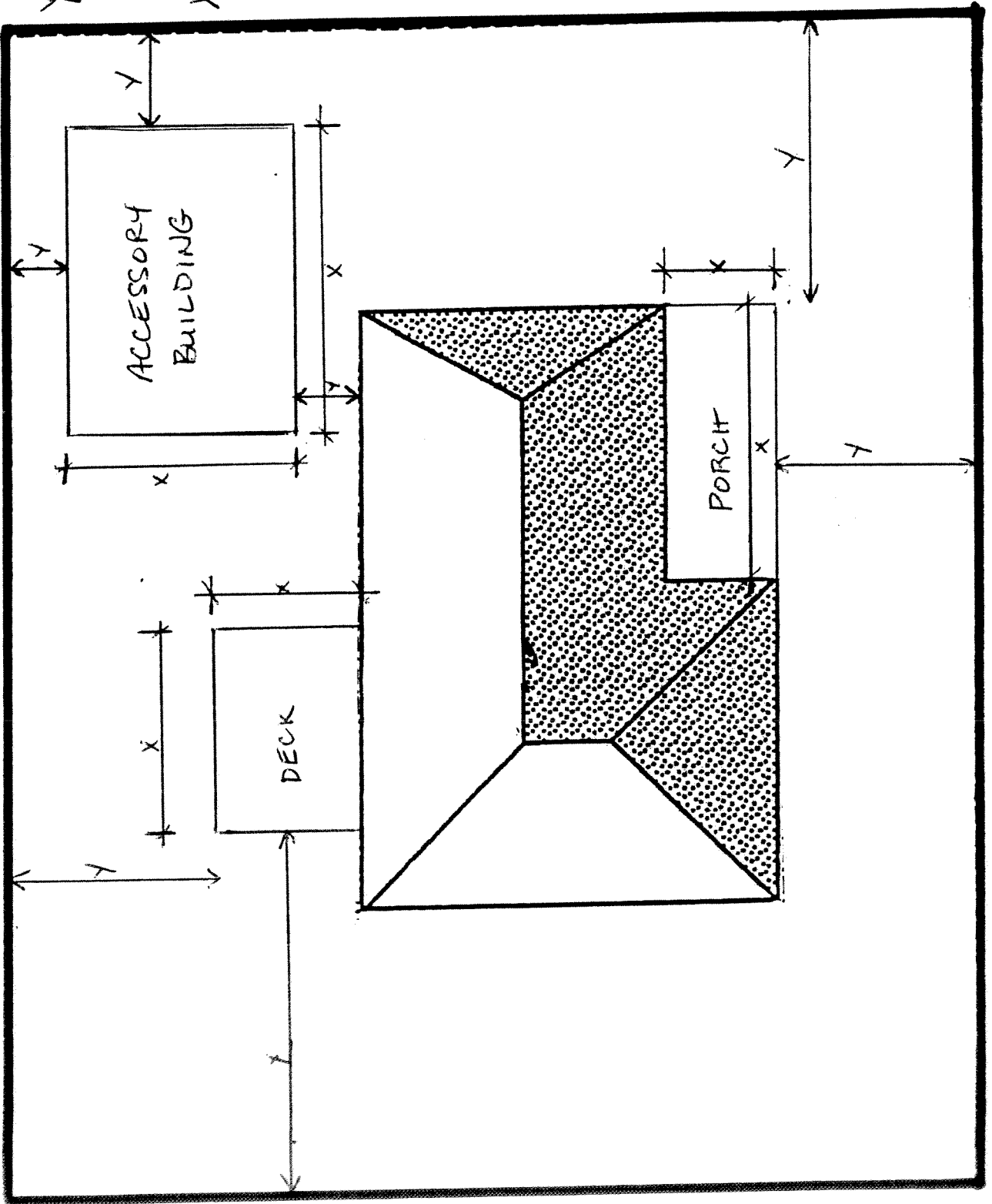
Show the following information on the drawing:

- House location
- Accessory building location
- Proposed pool location
- Property lines

Assume North is top of diagram.



EXAMPLE SITE PLAN



RESIDENTIAL MECHANICAL VENTILATION RECORD

for certification of design and performance of residential ventilation systems

W-2

A HEATING SYSTEM COMBUSTION APPLIANCE	<input type="checkbox"/> Forced air <input type="checkbox"/> Non forced air		Roll #:	Permit #:
	<input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Other		Lot & Plan #:	Township:
	<input type="checkbox"/> No combustion appliances no depressurization limit		Civic address:	
	<input type="checkbox"/> Solid fuel (including fireplaces) 5 pa depress limit		Name:	R2000 ID #
	<input type="checkbox"/> Direct vent (sealed combustion) only no depress limit		Address:	
	<input type="checkbox"/> Induced draft _____ pa depress limit		City:	Postal code:
<input type="checkbox"/> Natural draft or B-vent 5 pa depressurization limit		Phone:	Fax:	
B EXHAUST EQUIPMENT	<input type="checkbox"/> Clothes dryer 150 cfm (default)		Name:	HRAI #
	<input type="checkbox"/> Down draft cook top 220 cfm (default)		Address:	
	<input type="checkbox"/> Other: (over 150 cfm)		City:	Postal code:
	Depressurization test / calculation required? <input type="checkbox"/> yes <input type="checkbox"/> no		Phone:	Fax:
C TOTAL VENTILATION CAPACITY (TVC)	Bsm't & Master bdrm _____ @ 20 cfm _____ cfm		I certify this ventilation system design to be in accordance with: <input type="checkbox"/> CSA F328-M 91 <input type="checkbox"/> R-2000 <input type="checkbox"/> NBC '05 (9.32) <input type="checkbox"/> OBC '06(9.32) <input type="checkbox"/> BCBC '06 (9.32)	
	Other bedrooms _____ @ 10 cfm _____ cfm			
	Bathrooms & Kitchen _____ @ 10 cfm _____ cfm			
	Other habitable rooms _____ @ 10 cfm _____ cfm			
	TOTAL VENTILATION CAPACITY (TVC) _____ cfm			
D EXHAUST CAPACITY INTERMITTENT / CONTINUOUS	Kitchens _____ @ 60 cfm _____ cfm		<input type="checkbox"/> Controls functioning <input type="checkbox"/> Fans operating and clean	
	Bathrooms _____ @ 20 cfm _____ cfm		<input type="checkbox"/> Filters clean <input type="checkbox"/> Flow measuring stations	
	TOTAL _____ cfm		<input type="checkbox"/> Dampers accessible <input type="checkbox"/> Insulated duct sealed	
	Kitchens _____ @ 100 cfm _____ cfm		<input type="checkbox"/> Drain loop & connection	
	Bathrooms _____ @ 50 cfm _____ cfm		<input type="checkbox"/> Distribution to all habitable rooms	
	TOTAL _____ cfm		<input type="checkbox"/> Forced air system <input type="checkbox"/> continuous mode <input type="checkbox"/> interlocked	
E TVC SYSTEM	Location:		<input type="checkbox"/> Kitchen intake grease filter <input type="checkbox"/> Kitchen exhaust 40" to range	
	Manufacturer / Model: <input type="checkbox"/> HVI		<input type="checkbox"/> Exhaust 4' above grade <input type="checkbox"/> Supply 18" above grade	
	Design airflow: _____ cfm high _____ cfm low		<input type="checkbox"/> Supply intake 6' from exhaust (recommended)	
	_____ % sensible efficiency @ 0 °C _____ watts		<input type="checkbox"/> Supply intake 3' from other exhaust	
F ADDITIONAL EQUIPMENT	_____ % sensible efficiency @ -25 °C _____ watts		TVC system supply airflow measured: _____ cfm high _____ cfm low (_____ % TVC)	
	1. Location: _____ cfm _____ sones		TVC system exhaust airflow measured: _____ cfm high _____ cfm low (_____ % TVC)	
	Manufacturer / Model: <input type="checkbox"/> TVC <input type="checkbox"/> HVI		Name: HRAI #	
	2. Location: _____ cfm _____ sones		Address:	
	Manufacturer / Model: <input type="checkbox"/> TVC <input type="checkbox"/> HVI		City: Postal Code:	
	3. Location: _____ cfm _____ sones		Phone: Fax:	
	Manufacturer / Model: <input type="checkbox"/> TVC <input type="checkbox"/> HVI		I certify this ventilation system design to be in accordance with: <input type="checkbox"/> CSA F328-M 91 <input type="checkbox"/> R-2000 <input type="checkbox"/> NBC '05 (9.32) <input type="checkbox"/> OBC '06(9.32) <input type="checkbox"/> BCBC '06 (9.32)	
	4. Location: _____ cfm _____ sones		Signature: Date:	
Manufacturer / Model: <input type="checkbox"/> TVC <input type="checkbox"/> HVI				

H LOCATION
F BUILDER
J DESIGNER
K INSTALLATION CHECKLIST
L MEASURED TVC SYSTEM
M INSTALLER



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APPLICATION FOR ENTRANCEWAY

PERMIT: _____ BUILDING PERMIT: _____

APPLICANT: _____

ADDRESS: _____

PHONE: _____

TOWNSHIP ROAD: _____ LOT: _____ CONC: _____

The fee for a typical entranceway installation is \$600.00 for an 18" diameter culvert approximately 26' long. Where no culvert is required, the entranceway fee is \$100.00.

All proposed entranceways are subject to inspection and approval prior to installation by the Township Roads Superintendent, and additional costs may be required.

In order to determine the location of a proposed entranceway, the owner shall place a stake at the center of the proposed entranceway.

REMARKS: _____

SIGNATURE OF OWNER OR AUTHORIZED AGENT

ROADS SUPERINTENDENT
EDWARDSBURGH/CARDINAL

CHIEF BUILDING OFFICIAL
EDWARDSBURGH/CARDINAL

DATED AT _____, ONTARIO _____, 20____



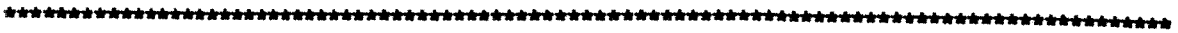
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911 SIGN APPLICATION

NAME: _____
LOT & CONC.: _____
ROAD NAME: _____
MAILING ADDRESS: _____



CONSTRUCTION PERMIT # _____
PROPERTY ROLL # _____
911 NUMBER ASSIGNED _____
TWP. RECEIPT or INVOICE # _____
date _____