

## **Structural Alterations within a Single, Semi. or Townhouse Dwelling** **Building Permit Application Requirements**

A building permit is required for all structural alterations within single family dwellings, semi-detached dwellings and townhouse dwelling units. (e.g. permit to remove a load bearing wall.)

The following information is required when applying for a building permit for structural alterations permit.

### **Designer Requirements**

All drawings submitted for building-permit application are required to be prepared by the listed homeowner or by a qualified designer, architect or professional engineer or a combination thereof. Some drawings must be designed by a professional engineer when the design falls under the scope of Parts 4 & 9, Division B of the 2012 Ontario Building Code.

The Building Code requires qualified and registered designers who review and take responsibility for design activities to include the following information on any documents submitted to a chief building official:

- The name and building code identification number (BCIN) of the registered firm.
- A statement that the qualified person has reviewed and taken responsibility for the design activities.
- The name and BCIN of the qualified person.
- The signature of the qualified person.

### **Drawing Requirements (Please provide 2 sets of all required drawings)**

- Floor plan of floor where alterations are being proposed (e.g. wall is being removed.)
- Floor plan of all floors above and below the floor where alterations are being proposed (e.g. wall is being removed.)
- Cross section view detailing proposed construction.

Drawings must indicate span and direction of existing floor joists, beam sizes and supports (new and existing).

All drawings shall be fully dimensioned, drawn at minimum scale of 1:75 or 3/16"= 1'-0"

### **Additional Information Required for Application**

- Application for a Permit to Construct or Demolish
- Schedule 1 Designer Information Form
- Approval from City of Vaughan Heritage Department (if applicable)
- Any other documents that pertain to your project



## **Fees**

Building permit fees are payable at the time of application and are as follows:

Building Permit Fee                      \$103.00 flat fee

## **Permit Processing and Turn-Around Time**

Once a complete permit application is made it will be reviewed by a Zoning Examiner and an Architectural Plans Examiner. The applicant will be advised directly by the plans examiners of any examination deficiencies as the permit application makes its way through the various stages of review.

Building Permit review times are dependant upon permit volumes. An application is considered “complete” if all required forms, documents and applicable information have been submitted and all permit fees have been paid. If an application is “complete”, the City of Vaughan endeavours to issue the permit or advise applicants of all application examination deficiencies within 10 business days from the date of the application.

Applications that do not have all the required forms, documents and applicable information are considered “incomplete” and are not subject to timeline specified above.

## **Where to Apply**

To apply for a building permit please bring all required documents to the Building Standards Department on the 1st floor at City Hall. City Hall is located at 2141 Major Mackenzie Drive, Vaughan, Ontario.

## **Office Hours**

Monday to Friday  
8:30am – 4:30pm

## **Questions?**

Phone: 905-832-8510

# 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 Authority			
Application number:		Permit number (if different):	
Date received:		Roll number:	
Application submitted to: <u>CITY OF VAUGHAN</u> (Name of municipality, upper-tier municipality, board of health or conservation authority)			
A. Project information			
Building number, street name		Unit number	Lot/con.
Municipality City of Vaughan	Postal code	Plan number/other description	
Project value est. \$		Area of work (m <sup>2</sup> )	
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).		<input type="checkbox"/> Yes	<input type="checkbox"/> No
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)

- The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.
- 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.

**Private Property Tree Protection By-Law 185-2007**

The following is required be completed for **New construction (For lots fronting on roads assumed by the City and not subject to a Site Plan Agreement), and all Additions, Accessory Bldgs, Decks, and Demolition Permit** applications. Enquiries or questions respecting the City's Tree By-law should be directed to Parks and Forestry Operations Department located at the Joint Operations Centre 2800 Rutherford Rd. Vaughan, ON. L4K 2N9 Telephone: (905) 832-8577 Fax (905) 303-2005

**Does the construction activity associated with this permit application require the removal or cutting of any tree(s) 20 cm. in diameter or greater when measured 1.40 meters from the ground level and/or the re-grading within the drip line of any existing tree(s) in accordance with the By-Law?**  Yes  No

I \_\_\_\_\_ certify that:  
 (print name)

- The information contained within the above is true to the best of my knowledge.
- I have authority to bind the corporation or partnership (if applicable).

**Office Use Only**

**Issued Date:** \_\_\_\_\_

Elevation No. \_\_\_\_\_ Model No. \_\_\_\_\_ Repeat Permit No. \_\_\_\_\_

Number of Residential Units Created \_\_\_\_\_ Number of Residential Units Lost (Demo Only) \_\_\_\_\_

Permit Type	Area Code	Building Type	Work Proposed	Occ. Class	Plumbing Work Included <input type="checkbox"/> Yes <input type="checkbox"/> No
Gross Floor Area (m <sup>2</sup> )		TACBOC \$/sqm.		Calculated Estimated Value of Construction (\$)	
<b>Building Permit Payments:</b>				<b>Building Permit Fees</b>	
Permit Fee Multiplier: _____				Total Due: \$ _____	
Date: _____ Payment Type: _____ Receipt: _____				Deposit: \$ _____	
Date: _____ Payment Type: _____ Receipt: _____				Balance: \$ _____	
<b>Conditional Permit Fee Payment:</b>				Amount Paid: \$ _____	
Date: _____ Payment Type: <u>011</u> Receipt: _____				Total Fee Paid \$ _____	
<b>Plumbing Payments:</b>				<b>Plumbing Permit Fees</b>	
Permit Fee Multiplier: _____				Total Due: \$ _____	
Date: _____ Payment Type: <u>024</u> Receipt: _____				Deposit: \$ _____	
Date: _____ Payment Type: : <u>024</u> Receipt: _____				Balance: \$ _____	
<b>Septic Fee Payments:</b>				<b>Septic Permit Fees</b>	
Date: _____ Payment Type: <u>024</u> Receipt: _____				Total Due \$ _____	
Date: _____ Payment Type: : <u>024</u> Receipt: _____					

Security Deposit Required:  Yes  No Security Deposit Received:  Yes  No Security Deposit Type: \_\_\_\_\_  
 Industrial Agreement:  Yes  No Add. Security Dep. Amount: \$ \_\_\_\_\_ Reason: \_\_\_\_\_  
 Development Charges:  Yes  No  
 Bill 124 – Required Processing Time:  10  15  20  30 days  
 Required Inspections  Building & Plumbing  Building Only  Plumbing Only  
 Energy Star Certified  Yes  No

## Schedule 1: Designer Information

Use one form for each individual who reviews and takes responsibility for design activities with respect to the project.

<b>A. Project Information</b>			
Building number, street name	Unit no.	Lot/con.	
Municipality	Postal code	Plan number/ other description	
<b>B. Individual who reviews and takes responsibility for design activities</b>			
Name		Firm	
Street address		Unit no.	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number (    )	Fax number (    )		Cell number (    )
<b>C. Design activities undertaken by individual identified in Section B. [Building Code Table 3.5.2.1. of Division C]</b>			
<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			
<b>D. Declaration of Designer</b>			
<p>I _____ declare that (choose one as appropriate):</p> <p style="text-align: center;">(print name)</p> <p><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.</p> <p style="padding-left: 40px;">Individual BCIN: _____</p> <p style="padding-left: 40px;">Firm BCIN: _____</p> <p><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.</p> <p style="padding-left: 40px;">Individual BCIN: _____</p> <p style="padding-left: 40px;">Basis for exemption from registration: _____</p> <p><input type="checkbox"/> The design work is exempt from the registration and qualification requirements of the Building Code.</p> <p style="padding-left: 40px;">Basis for exemption from registration and qualification: _____</p> <p>I certify that:</p> <ol style="list-style-type: none"> <li>1. The information contained in this schedule is true to the best of my knowledge.</li> <li>2. I have submitted this application with the knowledge and consent of the firm.</li> </ol> <p style="margin-top: 20px;">_____</p> <p style="display: flex; justify-content: space-between; width: 80%; margin: 0 auto;"> <span>Date</span> <span>Signature of Designer</span> </p>			

**NOTE:**

1. For the purposes of this form, "individual" means the "person" referred to in Clause 3.2.4.7(1) (c). 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 practice, a limited license to practice, or a certificate of authorization, issued by the Association of Professional Engineers of Ontario.

## Schedule 2: Sewage System Installer Information

<b>A. Project Information</b>			
Building number, street name		Unit number	Lot/con.
Municipality	Postal code	Plan number/ other description	
<b>B. Sewage system installer</b>			
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)			
<b>C. Registered installer information (where answer to B is "Yes")</b>			
Name		BCIN	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number (    )	Fax (    )	Cell number (    )	
<b>D. Qualified supervisor information (where answer to section B is "Yes")</b>			
Name of qualified supervisor(s)		Building Code Identification Number (BCIN)	
<b>E. Declaration of Applicant:</b>			
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;			
<b>OR</b>			
<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	