

Application for a Certified Model Pursuant to the City of Vaughan Building By-law

Note: This Application for a Certified Model is a form prescribed by the Chief Building Official pursuant to the City of Vaughan Building By-law and must be completed for each model. A certified model is NOT in itself a building permit. A Certified Model can only be used by the Builder in Section "C".

For use by City of Vaughan											
Certified Model Number: Date received:											
A. Project and Model I	nforma	ntion									
Builders Model Name:	Building Code Edition:				Latest O. Reg amendment #:						
Daliacis Model Name.		Danamy Code Lancin			Lan	and an angular man					
						-	<u>, </u>				
Type of Dwelling: Detached Dwelling Semi-Detached Dwe											
Office use:		001 □		005 □				<i>010</i> □ <i>015</i> □ Elevation:			
Options: (3 per Elevation)	Elevat	ion:		Elevation:			Elevai	ion:			
# of Bedrooms											
GFA (m ²)											
Alt. Floor Layout(s)											
Basement Walk Out (Y/N)											
Basement Walk Up (Y/N)											
Basement Look Out (Y/N)											
Basement (Finished) (Y/N)											
Secondary Suite (Y/N)											
Garage Option (Type) Special Feature:											
Deck (Y/N) Side door entry (Y/N)											
Other Details ()											
Other Details ()											
Other Details ()											
Other Details ()											
Limiting Distance (Left)											
Limiting Distance (Right)											
Limiting Distance (Rear)											
Energy Efficiency (Pkg)											
Work Description and Certified	d Model r	name previously assi	aned (if anni	icaple).		ı					
Work Description and Octimes	a ivioaci i	iame previously assignment	grica (ii appi	icabic).							
B. Applicant Applicant is: ☐ Owner or ☐ Authorized agent of owner							•				
				or partnership, name the person applying on its behalf)							
Last Name		First Name	(Corporation or	r par	tnership					
Street address								Unit	number		
Municipality		Postal code		Email							
Talanhana numbar		Fav				Call					
Telephone number		Fax				Cell					
C. Builder											
Registered Name of Builder			1	Contact					TARION		
regiotored Harrie of Builde						Reg. No.					
Street address			1						Unit number	er	
8.4				11 - 11							
Municipality		Postal code		E-mail							
Telephone number Fax				Cell number							
D. Declaration of Appl	icant										
<u> </u>			(print name	2)					certify	that:	
(print name) The information contained in this application, attached drawings and other documentation is true to the best of my											
knowledge.											
 Applicant is responsible for separate application of Repeats under the latest Ontario Regulation/amendments. 											
Date				Si	ignat	ure of Applicant					