

# Building Division

## Residential Interior Alteration/Renovation

### Permit Application Guide



#### Description

A building permit for an interior alteration or renovation to a small residential building, single detached dwelling, semi-detached dwelling or a townhouse.

#### General Information

A building permit is required to add or remove any structural component(s) of a building. A permit is also required to install new or repair existing plumbing in a building or part thereof, change the fuel source of a fireplace from gas-fired to solid burning (wood) or to change the use and/or classification of a building or dwelling.

#### Required Drawings

##### Survey or Site Plan – \*Required for new openings

Survey or Site Plan, referenced to a current survey, showing the size and location of the existing structure, as well as distances to property lines and adjacent structures.

##### Floor Plans & Elevations - Architectural & Structural

Fully dimensioned plans, for each floor level showing existing and proposed uses of all spaces. Provide existing and proposed construction including footing, foundation and exterior wall construction, interior partitions and all structural framing components. Drawings are to show location of smoke alarms, carbon monoxide detectors and all plumbing fixtures including existing and proposed. Provide all four exterior elevations with floor to ceiling heights and overall building height.

##### Sections & Details

Cross section(s) to show existing/proposed building construction and specifications of all floor, wall and roof assemblies. Provide footing and foundation wall details including height of exterior grade above basement floor. Show floor to ceiling height and overall building height calculated to the midpoint of the roof or as per the zoning by-law standard. Detail stairs, landings, headroom, guards and handrails heights as well as any structural connections and specifications where required.

##### HVAC Mechanical Drawings and calculations

Where required, floor plans illustrating the layout of mechanical systems for each floor showing ducts, return and supply air location, stacks size and type of HVAC equipment. Calculations for heat loss, heat gain, duct design and mechanical ventilation.

##### Plumbing Data Sheet

Where an alteration or renovation includes plumbing and is serviced by municipal sewers a plumbing data sheet is required.

##### Sewage System Evaluations or Upgrade

Where a dwelling is serviced by a private on-site sewage system an evaluation of the system is required. The addition of plumbing fixtures, bathrooms or bedrooms will require a system evaluation and/or could require a system upgrade or replacement. Sewage system drawings, details and calculations are to include Designer information on all documents. Statement of Design and site plan showing location of septic tank, leaching bed and water well, in relation to property lines, other structures, bodies of water (creeks, streams, ponds, etc.).

**Note:** Drawings prepared by a qualified Designer as defined by the Ontario Building Code, must include designer's name, Building Code Identification Number (BCIN), signature, and statement that the designer has reviewed and takes responsibility for the design and meets the qualifications set out in the Ontario Building Code as a Designer, other Designer or licensed sewage system contractor.

## Required Forms

- **Application for a Permit to Construct or Demolish**
- **Schedule 1 Designer Information** \* (if required)  
**Schedule 2 Sewage System Installer Information** \*(If a sewage system is being altered or installed)
- **Energy Efficiency Design Summary** \* (when HVAC alterations apply)
- **Plumbing Data Sheet** (required for dwellings serviced by municipal sewers)
- **Owner's Authorization Form**
- **Zoning Review Declaration**

## Exemptions - Schedule 1

If drawings are prepared, stamped and signed by a Professional Engineer or Architect licensed to practice in Ontario, they are exempt from submitting a Schedule 1. Property owners may prepare and submit drawings for residential interior alterations or renovations however the scope of work undertaken by a homeowner must stay within the design limits of Part 9 of the Ontario Building Code. Homeowners may fill-in the Schedule 1 form to take responsibility for the design activities being carried out.

## Required Fees – Residential

Building permit application fees can be found on the Townships website here: [Fees and Charges By-Law](#)

|   |  |
|---|--|
| Permit Fee  | As Per Fees and Charges <a href="#">By-Law</a> |
| Road Damage Deposit - all Municipal roadways *if applicable | \$1,000 - \$5,000                              |

## Apply Online

All applications for building permits are to be submitted online. To submit an application for building permit applicants will be asked to provide the above forms, fees and digital copies of the specified drawings. For further information regarding online submission application requirements please visit our Website page [Electronic Building Permit Application](#).

## Additional Requirements/Approvals/ Applicable Law

The Building Code Act prohibits the issuance of a Building permit if the proposed construction or demolition will contravene applicable law as defined in the Ontario Building Code. All building permit applications require approval from the Townships Planning Department to ensure all proposed changes to a building or structure complies with the Townships Zoning By-Law.

Please verify all approvals that may be necessary to submit a complete application. The following are examples:

- **Approval or Permit from Lake Simcoe Region Conservation Authority or Toronto Region Conservation Authority**
- **Site Plan Development Approval/Agreement** (Township Planning Department)
- **Committee of Adjustments – Minor Variance Approval** (Township Planning Department)

Should you have any questions or require clarification please contact the Building Division, King Township, 2075 King Road, King City, L7B 1A1 (905) 833-5321

# Application for a Permit to Construct or Demolish

This form is authorized under subsection 8(1.1) of the *Building Code Act, 1992*

| <b>For use by Principal Authority</b>   |   |  |                                     |   |
|---|---|--|-------------------------------------|---|
| Application number:   | Permit number (if different):                             |  |                                     |   |
| Date received:  | Roll number:  |  |                                     |   |
| Application submitted to: _____<br>(Name of municipality, upper-tier municipality, board of health or conservation authority) |   |  |                                     |   |
| <b>A. Project information</b>   |   |  |                                     |   |
| Building number, street name  | Unit number   | Lot/con.                                   |                                     |   |
| Municipality  | Postal code   | Plan number/other description              |                                     |   |
| Project value est. \$   | Area of work (m <sup>2</sup> )                            |  |                                     |   |
| <b>B. Purpose of application</b>  |   |  |                                     |   |
| <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  |   |  |                                     |   |
| <b>C. Applicant</b>   |   |  |                                     |   |
| 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                         |   |
| <b>D. Owner (if different from applicant)</b>   |   |  |                                     |   |
| Last name   | First name  | Corporation or partnership                 |                                     |   |
| Street address  | Unit number   | Lot/con.                                   |                                     |   |
| Municipality  | Postal code   | Province                                   | E-mail                              |   |
| Telephone number  | Fax   |  | Cell number                         |   |

| <b>E. Builder (optional)</b>  |  |                              |  |                             |
|---|--|------------------------------|--|-----------------------------|
| 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                                |                             |
| <b>F. Tarion Warranty Corporation (Ontario New Home Warranty Program)</b>   |  |                              |  |                             |
| 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): _____   |  |                              |  |                             |
| <b>G. Required Schedules</b>  |  |                              |  |                             |
| 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.   |  |                              |  |                             |
| <b>H. Completeness and compliance with applicable law</b>   |  |                              |  |                             |
| 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).<br>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 |
| <b>I. Declaration of applicant</b>  |  |                              |  |                             |
| I _____ declare that:<br>(print name)   |  |                              |  |                             |
| <ol style="list-style-type: none"> <li>The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.</li> <li>If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.</li> </ol>   |  |                              |  |                             |
| _____ 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.

| <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>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="margin-left: 40px;">Individual BCIN: _____</p> <p style="margin-left: 40px;">Firm BCIN: _____</p> <p>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="margin-left: 40px;">Individual BCIN: _____</p> <p style="margin-left: 40px;">Basis for exemption from registration: _____</p> <p style="margin-left: 40px;">The design work is exempt from the registration and qualification requirements of the Building Code.</p> <p style="margin-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-left: 40px;">_____</p> <p style="margin-left: 40px;">Date <span style="margin-left: 150px;">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 practise, a limited license to practise, or a certificate of authorization, issued by the Association of Professional Engineers of Ontario.



# Energy Efficiency Design Summary: Prescriptive Method

(Building Code Part 9, Residential)

This form is used by a designer to demonstrate that the energy efficiency design of a house complies with the building code using the prescriptive method described in Subsection 3.1.1. of SB-12. This form is applicable where the ratio of gross area of windows/sidelights/skylights/glazing in doors and sliding glass doors to the gross area of peripheral walls is not more than 22%.

**For use by Principal Authority**

|                 |                            |
|-----------------|----------------------------|
| Application No: | Model/Certification Number |
|-----------------|----------------------------|

## A. Project Information

|                              |             |                                      |
|------------------------------|-------------|--------------------------------------|
| Building number, street name | Unit number | Lot/Con                              |
| Municipality                 | Postal code | Reg. Plan number / other description |

## B. Prescriptive Compliance [indicate the building code compliance package being employed in this house design]

*SB-12 Prescriptive (input design package):* Package: \_\_\_\_\_ Table: \_\_\_\_\_

## C. Project Design Conditions

|  |  |   |
|--|--|---|
| <b>Climatic Zone (SB-1):</b>   | <b>Heating Equipment Efficiency</b>  | <b>Space Heating Fuel Source</b>  |
| <input type="checkbox"/> Zone 1 (< 5000 degree days)                       | <input type="checkbox"/> ≥ 92% AFUE  | <input type="checkbox"/> Gas <input type="checkbox"/> Propane <input type="checkbox"/> Solid Fuel                     |
| <input type="checkbox"/> Zone 2 (≥ 5000 degree days)                       | <input type="checkbox"/> ≥ 84% < 92% AFUE  | <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Earth Energy                  |
| <b>Ratio of Windows, Skylights &amp; Glass (W, S &amp; G) to Wall Area</b> |  | <b>Other Building Characteristics</b>   |
| Area of walls = _____ m <sup>2</sup> or _____ ft <sup>2</sup>              | W, S & G % = _____   | <input type="checkbox"/> Log/Post&Beam <input type="checkbox"/> ICF Above Grade <input type="checkbox"/> ICF Basement |
| Area of W, S & G = _____ m <sup>2</sup> or _____ ft <sup>2</sup>           | Utilize window averaging: <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Slab-on-ground <input type="checkbox"/> Walkout Basement                                     |
|  |  | <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Combo Unit   |
|  |  | <input type="checkbox"/> Air Sourced Heat Pump (ASHP)   |
|  |  | <input type="checkbox"/> Ground Sourced Heat Pump (GSHP)  |

## D. Building Specifications [provide values and ratings of the energy efficiency components proposed]

| Energy Efficiency Substitutions  |  |  |                    |
|--|--|--|--------------------|
| <input type="checkbox"/> ICF (3.1.1.2.(5) & (6) / 3.1.1.3.(5) & (6))   |  |  |                    |
| <input type="checkbox"/> Combined space heating and domestic water heating systems (3.1.1.2.(7) / 3.1.1.3.(7)) |  |  |                    |
| <input type="checkbox"/> Airtightness substitution(s)  | <input type="checkbox"/> Table 3.1.1.4.B Required: _____ Permitted Substitution: _____ |  |                    |
| Airtightness test required<br>(Refer to Design Guide Attached)   | <input type="checkbox"/> Table 3.1.1.4.C Required: _____ Permitted Substitution: _____ |  |                    |
|  |  | Required: _____ Permitted Substitution: _____                          |                    |
| Building Component   | Minimum RSI / R values<br>or Maximum U-Value <sup>(1)</sup>                            | Building Component   | Efficiency Ratings |
| <b>Thermal Insulation</b>  | Nominal    Effective   | <b>Windows &amp; Doors</b> Provide U-Value <sup>(1)</sup> or ER rating |                    |
| Ceiling with Attic Space   |  | Windows/Sliding Glass Doors  |                    |
| Ceiling without Attic Space  |  | Skylights/Glazed Roofs   |                    |
| Exposed Floor  |  | <b>Mechanicals</b>   |                    |
| Walls Above Grade  |  | Heating Equip.(AFUE)   |                    |
| Basement Walls   |  | HRV Efficiency (SRE% at 0° C)  |                    |
| Slab (all >600mm below grade)  |  | DHW Heater (EF)  |                    |
| Slab (edge only ≤600mm below grade)  |  | DWHR (CSA B55.1 (min. 42% efficiency))                                 | # Showers _____    |
| Slab (all ≤600mm below grade, or heated)   |  | Combined Heating System  |                    |

(1) U value to be provided in either W/(m<sup>2</sup>·K) or Btu/(h·ft<sup>2</sup>·F) but not both.

## E. Designer(s) [name(s) & BCIN(s), if applicable, of person(s) providing information herein to substantiate that design meets the building code]

| Qualified Designer Declaration of designer to have reviewed and take responsibility for the design work. |      |           |
|--|------|-----------|
| Name   | BCIN | Signature |
|  |      |           |

# Guide to the Prescriptive Energy Efficiency Design Summary Form

This form must accurately reflect the information contained on the drawings and specifications being submitted. Refer to Supplementary Standard SB-12 for details about building code compliance requirements. Further information about energy efficiency requirements for new buildings is available from the provincial building code website or the municipal building department.

The building code permits a house designer to use one of four energy efficiency compliance options:

1. Comply with the SB-12 Prescriptive design tables (this form is for this option (Option 1)),
2. Use the SB-12 Performance compliance method, and model the design against the prescriptive standards,
3. Design to Energy Star, or
4. Design to R2000 standards.

## COMPLETING THE FORM

### B. Compliance Options

Indicate the compliance option being used.

- SB-12 Prescriptive requires that the building conforms to a package of thermal insulation, window and mechanical system efficiency requirements set out in Subsection 3.1.1. of SB-12. Energy efficiency design modeling and testing of the building is not required under this option. Certain substitutions are permitted. In which case, the applicable airtightness targets in Table 3.1.1.4.A must be met.

### C. Project Design Conditions

*Climatic Zone:* The number of degree days for Ontario cities is contained in Supplementary Standard SB-1  
*Windows, Skylights and Glass Doors:* If the ratio of the total gross area of windows, sidelights, skylights, glazing in doors and sliding glass doors to the total gross area of walls is more than 17%, higher efficiency glazing is required. If the ratio is more than 22%, the SB-12 Prescriptive option may not be used. The total area is the sum of all the structural rough openings. Some exceptions apply. Refer to 3.1.1.1. of SB-12 for further details.

*Fuel Source and Heating Equipment Efficiency:* The fuel source and efficiency of the proposed heating equipment must be specified in order to determine which SB-12 Prescriptive compliance package table applies.

*Other Building Conditions:* These construction conditions affect SB-12 Prescriptive compliance requirements.

### D. Building Specifications

*Thermal Insulation:* Indicate the RSI or R-value being proposed where they apply to the house design. Under the SB-12 Prescriptive option, alternative ICF wall insulation is permitted in certain conditions where other design elements meet higher standards. Refer to SB-12 for further details. Where effective insulation values are being used, the Authority Having Jurisdiction may require supporting documentation.

## BUILDING CODE REQUIREMENTS FOR AIRTIGHTNESS IN NEW HOUSES

All houses must comply with increased air barrier requirements in the building code. Notice of air barrier completion must be provided and an inspection conducted prior to it being covered.

The air leakage rates in Table 3.1.1.4.A are not requirements. This provision is a voluntary provision for when credits for airtightness are claimed. Credit for air tightness allows the designer to substitute the requirements of compliance packages as set out in Table 3.1.1.4.B or 3.1.1.4.C. Neither the air leakage test nor compliance with airtightness targets given in Table 3.1.1.4.A are required, unless credit for airtightness is claimed. Table 3.1.1.4.A provides airtightness targets in three different metrics; ACH, NLA, NLR. Any one of them can be used. OBC Reference Default Air Leakage Rates (Table 3.1.1.4.A)

| Building Type     | Airtightness Targets |                                      |  |                         |                            |
|-------------------|----------------------|--------------------------------------|--|-------------------------|----------------------------|
|                   | ACH @ 50 Pa          | NLA @ 10 Pa                          |  | NLR @ 50 Pa             |                            |
| Detached dwelling | 2.5                  | 1.26 cm <sup>2</sup> /m <sup>2</sup> | 1.81 in <sup>2</sup> /100ft <sup>2</sup> | 0.93 L/s/m <sup>2</sup> | 0.18 cfm50/ft <sup>2</sup> |
| Attached dwelling | 3.0                  | 2.12 cm <sup>2</sup> /m <sup>2</sup> | 3.06 in <sup>2</sup> /100ft <sup>2</sup> | 1.32 L/s/m <sup>2</sup> | 0.26 cfm50/ft <sup>2</sup> |

The building code requires that a blower door test be conducted to verify the air tightness of the house during construction if the SB-12 Prescriptive option with airtightness credit being applied. Results of the airtightness test may need to be submitted to the Authority Having Jurisdiction. Airtightness of less than 2.5 ACH @ 50 Pa (or NLA or NLR equivalent) in the case of detached houses, or 3.0 ACH @ 50 Pa (or NLA or NLR equivalent) in the case of attached houses is necessary to meet the required energy efficiency standard.

### E. House Designer

The building code requires designers providing information about whether a building complies with the building code to have a BCIN. Exemptions apply to architects, engineers and owners designing their own house.



# Building Division Plumbing Data Form



## Project Information

**PERMIT APPLICATION No.** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PROJECT DESCRIPTION:** \_\_\_\_\_

**PROPERTY ADDRESS:** \_\_\_\_\_

Street No. and Name \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

**OWNER NAME:** \_\_\_\_\_

First \_\_\_\_\_ Last \_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

## Fixture Information

| Fixture or Device                                 | Fixture Units | Basement | 1st Floor | 2nd Floor | 3rd Floor | Total    |
|---|---------------|----------|-----------|-----------|-----------|----------|
| Bathroom group with 6 LPF flush tank (3 fixtures) | 3.6           |          |           |           |           | 0        |
| Bathroom group with > 6 LPF flush tank            | 6.0           |          |           |           |           | 0        |
| Bathroom group with 4 fixtures                    | 5.0           |          |           |           |           | 0        |
| Bathroom group with 5 fixtures                    | 6.4           |          |           |           |           | 0        |
| Bathroom group with 6 fixtures                    | 7.8           |          |           |           |           | 0        |
| Bathtub with or without shower head               | 1.4           |          |           |           |           | 0        |
| Bathtub with ¾ in. spout                          | 10.0          |          |           |           |           | 0        |
| Bidet   | 2.0           |          |           |           |           | 0        |
| Clothes washer, 3.5kg                             | 1.4           |          |           |           |           | 0        |
| Dishwasher, domestic                              | 1.4           |          |           |           |           | 0        |
| Hose bibb ( ½ inch supply)                        | 2.5           |          |           |           |           | 0        |
| Hose bibb ( ¾ inch supply)                        | 3.0           |          |           |           |           | 0        |
| Hose bibb, combination hot and cold               | 2.5           |          |           |           |           | 0        |
| Lavatory (wash sink), 8.3 L/min or less           | 0.7           |          |           |           |           | 0        |
| Lavatory (wash sink), greater than 8.3 L/min      | 1.0           |          |           |           |           | 0        |
| Shower head, 9.5 L/min or less per head           | 1.4           |          |           |           |           | 0        |
| Shower head, greater than 9.5 L/min per head      | 2.0           |          |           |           |           | 0        |
| Shower, spray, multi-head, fixture unit per head  | 1.4           |          |           |           |           | 0        |
| Sink, bar   | 1.0           |          |           |           |           | 0        |
| Sink, kitchen, domestic, 8.3 L/min or less        | 1.4           |          |           |           |           | 0        |
| Sink, kitchen, domestic, greater than 8.3 L/min   | 2.0           |          |           |           |           | 0        |
| Sink, laundry (1 or 2 compartments)               | 1.4           |          |           |           |           | 0        |
| Urinal, with flush tank                           | 3.0           |          |           |           |           | 0        |
| Urinal, with self-closing metering valve          | 2.0           |          |           |           |           | 0        |
| Water closet, 6 LPF or less with flush tank       | 2.2           |          |           |           |           | 0        |
| Water closet, greater than 6 LPF with flush tank  | 3.0           |          |           |           |           | 0        |
| <b>Total Fixture Units =</b>                      |               |          |           |           |           | <b>0</b> |

I hereby certify that the information supplied above is accurate to the best of my knowledge.

Name (please print) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Personal information collected on this form is under the authority of the Municipal Act, s. 11. The purpose of this collection is to administer the Service Connection Permit Application Process. Personal information provided on this form is protected in accordance with Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) Part II. Should you have any questions or concerns regarding the collection of personal information, please contact the Building Division, King Township, 2585 King Road, King City, ON L7B 1A1 (905) 833-4078.

# Building Division Letter of Authorization



## Information

Property Address: \_\_\_\_\_

Legal Description: \_\_\_\_\_

Roll Number: \_\_\_\_\_

## Personal Information

Name: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

## Authorizing Letter

To Whom it May Concern:

I/We, the above, do give \_\_\_\_\_ permission to act as our agent in applying to the Township of King for a building permit for the following projects:

(check all that apply)

- Demolition of Accessory Structure
- Demolition of Residential Building
- Demolition of Commercial/Industrial Building
- Construction of Dwelling
- Addition to Dwelling
- Construction of Accessory Structure
- Construction of a Deck
- Construction of Commercial/Industrial Building
- Renovation to Existing Building
- Other: (please specify) \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Building Division Zoning Review Declaration



## General Information

Zoning review is a detailed review of proposed construction, demolition and/or development intended to support a building permit application. This review determines zoning compliance and confirms compliance with other applicable law and by-laws. Zoning review is completed by the Planning Department.

**Project Information:**     AGENT/ APPLICANT                       OWNER

**OWNER NAME:**

\_\_\_\_\_

First Last

**APPLICANT NAME:**

(IF DIFFERENT THAN ABOVE)

\_\_\_\_\_

First Last

**PROPERTY ADDRESS:**

\_\_\_\_\_

Street No. and Name                      City                      Postal Code

**LEGAL DESCRIPTION:**

\_\_\_\_\_

Lot No.                      Plan No.                      Concession

**MAILING ADDRESS**

(IF DIFFERENT THAN ABOVE)

\_\_\_\_\_

Street No. and Name                      City                      Postal Code

**TELEPHONE NUMBER:**

\_\_\_\_\_

**EMAIL ADDRESS:**

\_\_\_\_\_

## Declaration and Acknowledgement of Applicant

**I hereby declare and acknowledge the following:**

- I am,     the owner as stated above  
           the owner's authorized agent  
           an officer/employee of \_\_\_\_\_ which is an authorized agent of the owner

The time period for building permit application review according to OBC 1.3.1.3. Part 1, Division C, cannot be established until all required applicable law approvals, including zoning review, are complete and the approved documents are returned to the Building Division.

The Building Code Act prohibits the issuance of a building permit if proposed construction or demolition will contravene applicable law as defined in the Building Code.

This review does not relieve the owner from complying with the Ontario Building Code, the Act, all applicable by-laws and regulations.

**I hereby certify that I have read and agree to the information presented on this page.**

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Personal information collected on this form is under the authority of the Municipal Act, s. 11. The purpose of this collection is to administer the Service Connection Permit Application Process. Personal information provided on this form is protected in accordance with Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) Part II. Should you have any questions or concerns regarding the collection of personal information, please contact the Building Division, King Township, 2585 King Road, King City, ON L7B 1A1 (905) 833-4078.