



Building/Development Permit Application

Instructions to Applicant:

1. Where possible seek the assistance of your contractor, your architect, or the Oromocto Technical Services Office in completing this form.
2. Fee is payable at the time of application.
3. Complete **all** applicable sections. Failure to provide all necessary information may cause delay.
4. **Complete** sets of drawings (**including** site plan drawn to a suitable scale) must be submitted with this application:
Residential — 2 sets (1 retained); Commercial — 3 sets (2 retained)
5. Other approvals may be necessary before this permit can be issued. Check with the Building Inspector or Development Officer.
6. Applicants requiring water and sewer services must contact the Oromocto Public Works Department at 357-4409. Connections will not commence until the water/sewer deposit has been paid and a plumbing permit has been issued by the Department of Public Safety.
7. Applicants carrying out plumbing or electrical work shall contact the Department of Public Safety - Safety Code Services at 453-2740 to obtain proper permits and approvals.

Please Complete All Applicable Sections:

Applicant: _____ Phone: _____

Mailing Address: _____

Property Owner: _____ Phone: _____

Mailing Address: _____

Designer: _____ Phone: _____

Mailing Address: _____

To: Erect Add Modify Demolish Locate

Estimated Cost of Work: \$ _____

Construction to Commence: _____ Expected Completion Date: _____

Location of Project: _____

Civic No. & Street Name

Lot Number

PID No.

Building area (m²) _____

Lot area (m²) _____

Lot Coverage (%) _____

Type of Occupancy	Misc. Information	Construction Type	Exterior	Heating	Subcontractors
<input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Institutional <input type="checkbox"/> Industrial	No. of Dwelling Units/Suites _____ No. of Bedrooms _____ Stories _____ Basement: <input type="checkbox"/> Finished <input type="checkbox"/> Unfinished Patio Deck Size _____	Wood framed <input type="checkbox"/> Steel framed <input type="checkbox"/> Concrete: - Poured <input type="checkbox"/> - Reinforced <input type="checkbox"/> - Block <input type="checkbox"/> Foundation Type: _____	Vinyl <input type="checkbox"/> Wood <input type="checkbox"/> Brick <input type="checkbox"/> Stone <input type="checkbox"/> Metal <input type="checkbox"/> Stucco <input type="checkbox"/>	Electric <input type="checkbox"/> Oil <input type="checkbox"/> Wood <input type="checkbox"/> Gas <input type="checkbox"/> Solar <input type="checkbox"/>	Foundation: _____ Plumbing: _____ Electrical: _____ Ventilation: _____

Additional Description or Conditions: _____

To the Building Inspector:

I, _____ of _____
(Print Name)

in the county of _____ do solemnly declare:

1. THAT I hereby request a building permit as described, and agree to conform to all by-laws and pertinent administrative requirements;
2. THAT I am the owner (or authorized agent) named in the above application;
3. THAT the declarations contained herein are completely true and made with full knowledge of all circumstances connected therewith.

And I make this declaration sincerely believing that it is true and that it has the same value and effect as if it had been solemnly sworn under the "Canada Evidence Act".

Signature: _____ **Date:** _____ **Received By:** _____

For Official Use Only:

Permit Fee:	Date Paid:
Building Deposit:	Date Paid: Date Refunded:
W/S Deposit:	Date Paid:
Curb Reduction Deposit:	Date Paid:
Permit No.:	Date Issued:
Sewage Service:	Water Service:

	Yes	No	Checklist for Building Inspector:	
Building Plans	<input type="checkbox"/>	<input type="checkbox"/>		<u>Date</u>
Specifications	<input type="checkbox"/>	<input type="checkbox"/>	- Pre Footing Inspection	_____
Survey Plan	<input type="checkbox"/>	<input type="checkbox"/>	- Pre Backfill Inspection	_____
Site Plan	<input type="checkbox"/>	<input type="checkbox"/>	- Pre Drywall Inspection	_____
Deck Plan	<input type="checkbox"/>	<input type="checkbox"/>	- Final Inspection	_____
			- Other Inspection	_____
			- Surveyor's Property Report	_____
			- Geo-Technical Report	_____
			- Ventilation Record Form	_____
			- Other	_____
Approved By:	Yes	No	Date	
PAC	<input type="checkbox"/>	<input type="checkbox"/>	_____	
Development Officer	<input type="checkbox"/>	<input type="checkbox"/>	_____	
Building Inspector	<input type="checkbox"/>	<input type="checkbox"/>	_____	
Fire Inspector	<input type="checkbox"/>	<input type="checkbox"/>	_____	
Fire Marshall	<input type="checkbox"/>	<input type="checkbox"/>	_____	
Dept. of Environment	<input type="checkbox"/>	<input type="checkbox"/>	_____	
Dept. of Health	<input type="checkbox"/>	<input type="checkbox"/>	_____	
D.O.T.	<input type="checkbox"/>	<input type="checkbox"/>	_____	

Comments: _____
