BROCKVILLE
CITY OF THE 1000 ISLANDS

Schedule 1 to By-Law No. 053-2025
List of Applicable Forms required for Permit

Forms are required by the Chief Building Official but not attached to this By-Law. As such, they may be amended to reflect changes to Provincial Legislation, Municipal By-Laws, etc. Forms are available at the Building Department, or online at www.brockville.com

Form	Title
A	Application for a Permit to Construct or Demolish
A.1	Designer Information
A.2	Sewage System Installer Information
A.3	Commitment to General Review by Architect and Engineers
A.4.1	Licensed Contractors – Plumbing Information Form
A.4.2	Licensed Contractors – HVAC Design Information Sheet (Renovations)
A.4.3	New House Information Form
A.5.1	Energy Efficiency Design Summary: Prescriptive Method
A.5.2	Energy Efficiency Design Summary: Performance & Other Acceptable Compliance Methods
A.6	Residential Mechanical Ventilation and HVAC Design Summary
A7.1	Demolition Permit Application Checklist
A 7.2	Demolition and Moving Utility Authorization Form
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A.9	Application Information for Photo Voltaic System
A.10	Solid Fuel Burning Space Heating Appliance Information Form
A.11	Location Dependent Requirement Declaration Summary
A.12	Agent of Record Letter
B	Partial Occupancy Permit Application
C	Plan Resubmission Application
D	Transfer of Permit Application

BROCKVILLE
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FORM A 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: _____
(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

☐ New construction ☐ Addition to an existing building ☐ Alteration/repair ☐ Demolition ☐ Conditional Permit

Proposed use of building	Current use of building
Description of proposed work	

C. Applicant

Applicant is: ☐ Owner or ☐ 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 (if known)

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. New home construction licensing requirement

i. Is the proposed construction for a new home as defined in the *New Home Construction Licensing Act, 2017*? If no, go to section G.	☐ Yes	☐ No
ii. Is a licence required under the *New Home Construction Licensing Act, 2017*?	☐ Yes	☐ No

iii. If yes to (ii) provide licence 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).	☐ Yes	☐ 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 *Building Code Act, 1992*, to be paid when the application is made.	☐ Yes	☐ 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 *Building Code Act, 1992.*	☐ Yes	☐ 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 *Building Code Act, 1992* which enable the chief building official to determine whether the proposed building, construction or demolition will contravene any applicable law.	☐ Yes	☐ No
iv) The proposed building, construction or demolition will not contravene any applicable law.	☐ Yes	☐ 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., 12th Floor. Toronto, ON M7A 2J3 (416) 585-6666.

BROCKVILLE
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FORM A.1 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

Building number, street name		Unit no.	Lot/con.
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]

☐ House	☐ HVAC – House	☐ Building Structural
☐ Small Buildings	☐ Building Services	☐ Plumbing – House
☐ Large Buildings	☐ Detection, Lighting and Power	☐ Plumbing – All Buildings
☐ Complex Buildings	☐ Fire Protection	☐ On-site Sewage Systems

Description of designer's work

D. Declaration of Designer

I _____ declare that (choose one as appropriate):
(print name)

☐ 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: _____

☐ 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: _____

☐ 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) (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 Professional Engineers Ontario.

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FORM A.2
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?

☐ Yes (Continue to Section C) ☐ No (Continue to Section E) ☐ 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)

☐ 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;

OR

☐ 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

BROCKVILLE
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FORM A.3

COMMITMENT TO GENERAL REVIEW BY ARCHITECT AND ENGINEER

PART A – TO BE COMPLETED BY OWNER

Project Description:

Permit Application No.

Address of Project: Municipality:

WHEREAS the building code requires that the project described above be designed and reviewed during construction or demolition by an architect, a professional engineer or both that are licensed to practice in Ontario, and
WHEREAS Ontario law prohibits the construction or demolition of a building if a permit has not been issued to authorize it, and
WHEREAS architects and engineers are prohibited by law from undertaking general review of construction if a permit has not been issued,
NOW THEREFORE the Owner, who intends to construct or demolish or have the building constructed or demolished, hereby confirms that:

1. The undersigned architect and/or professional engineers have been retained to provide general review of the construction or demolition of the building to determine whether the work is in general conformity with the plans and other documents that form the basis for the issuance of a permit, in accordance with the performance standards of the Ontario Association of Architects (OAA) and/or Professional Engineers Ontario (PEO);
2. All general review reports by the architect and/or professional engineers will be forwarded to the Chief Building Official;
3. Should any retained architect or professional engineer cease to provide general review for any reason during construction or demolition, the Chief Building Official will be notified in writing immediately, and another architect or engineer will be appointed so that general review continues without interruption; and
4. Construction or demolition will only be undertaken if an architect and/or professional engineers are retained to undertake general review, and a permit authorizing the proposed construction or demolition has been issued.

The undersigned hereby certifies that he/she has read and agrees to the above

Owner's Name: Date:

Owner's Address: Telephone:

Signature of Owner: (or authorized agent) Print Name: Fax:

Coordinator of the work of all consultants: Telephone:

Address: Fax:

PART B – TO BE COMPLETED BY CONSULTANTS

The undersigned architect and/or professional engineers hereby certify that they have been retained to provide general review of the parts of construction or demolition of the building indicated, to determine whether the work is in general conformity with the plans and other documents that form the basis for the issuance of a permit, in accordance with the performance standards of the OAA and/or PEO.

ARCHITECTURAL **STRUCTURAL** **MECHANICAL** **ELECTRICAL** **SITE SERVICES** **OTHER:**_____
Consultant Name: Signature: Print Name: Date:

Telephone: Address:

ARCHITECTURAL **STRUCTURAL** **MECHANICAL** **ELECTRICAL** **SITE SERVICES** **OTHER:**_____
Consultant Name: Signature: Print Name: Date:

Telephone: Address:

ARCHITECTURAL **STRUCTURAL** **MECHANICAL** **ELECTRICAL** **SITE SERVICES** **OTHER:**_____
Consultant Name: Signature: Print Name: Date:

Telephone: Address:

ARCHITECTURAL **STRUCTURAL** **MECHANICAL** **ELECTRICAL** **SITE SERVICES** **OTHER:**_____
Consultant Name: Signature: Print Name: Date:

Telephone: Address:

BROCKVILLE
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FORM A.4.1
Plumbing Information Form

This form is prescribed by the Chief Building Official under the authority of the Building By-Law

This form shall be completed by the applicant for a permit that includes any proposed construction, alteration, and demolition of a plumbing system.

A. Project information
Building/property civic address number and street name
Description of proposed project

B. Plumbing information	
Plumber's name, corporation name	Plumber's license number
If no plumber information is provided, the applicant shall submit a design of the plumbing system.	

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FORM A.4.2
HVAC DESIGN INFORMATION SHEET (Renovations)

This form is prescribed by the Chief Building Official under the Building By-Law

This form shall be completed by the applicant for a renovation of a house that contains an HVAC alteration or new installation and shall be submitted with the application for permit.

A. Project information		
Civic address number and street name		
Type of house ☐ Single Detached	☐ Semi-detached	☐ Rowhouse/Townhouse

B. HVAC information	
HVAC installer's name, corporation name	HVAC installer's license # or HRAI #
• If a qualified HVAC installer's information is provided, the applicant need not submit a full design of the HVAC system with the application, and only a copy of the HRAI 'Residential Mechanical Ventilation Design Summary' is required to be submitted. • Notwithstanding the above, the applicant, builder, and HVAC installer shall ensure that the HVAC system is designed and constructed in accordance with good engineering practice per the requirements of Div. B Sections 9.32. and 9.33. of the code.	

C. Declaration of Applicant		
Applicant name (print)	Applicant signature	Date

BROCKVILLE
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FORM A.4.3
New House Information Form

This form is prescribed by the Chief Building Official under the Building By-Law

This form shall be completed by the applicant for each new house and shall be submitted with the application for permit.

A. Project information
Civic address number and street name
Type of house ☐ Single Detached ☐ Semi-detached ☐ Rowhouse/Townhouse
Does the house contain any additional dwelling units? ☐ No ☐ Yes, state the number of additional dwellings in the house: _____
Does the house contain any finished floor areas in the basement? ☐ No ☐ Yes

B. Building area	
Total building area *(the greatest horizontal area of the house above grade within the outside surface of exterior walls, and the centre line of party walls)*	square metres (m²)
Gross floor area of all storeys **above grade** *(area of all floors above grade measured between the outside surfaces of exterior walls and the centre line of party walls, finished or unfinished)*	square metres (m²)

C. Plumbing information	
Plumber's name, corporation name	Plumber's license #
• If a licenced plumber's information is provided, the applicant need not submit a full design of the plumbing system with the application. • Notwithstanding the above, the applicant, builder, and plumber, shall ensure that the pluming system is designed and constructed per the requirements of Div. B Part 7 of the code.	

D. HVAC information	
HVAC installer's name, corporation name	HVAC installer's license # or HRAI #
• If a qualified HVAC installer's information is provided, the applicant need not submit a full design of the HVAC system with the application, and only a copy of the HRAI 'Residential Mechanical Ventilation Design Summary' is required to be submitted. • Notwithstanding the above, the applicant, builder, and HVAC installer shall ensure that the HVAC system is designed and constructed in accordance with good engineering practice per the requirements of Div. B Sections 9.32. and 9.33. of the code.	

E. Declaration of Applicant		
Applicant name (print)	Applicant signature	Date

BROCKVILLE
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FORM A.5.1
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 number:	Model/Certification Number

A. Project Information

Building number, street name		Unit number	Lot/con.
Municipality	Postal code	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

Climatic Zone (SB-1):	**Heating Equipment Efficiency**	**Space Heating Fuel Source**		
☐ Zone 1 (< 5000 degree days)	☐ ≥ 92% AFUE	☐ Gas	☐ Propane	☐ Solid Fuel
☐ Zone 2 (≥ 5000 degree days)	☐ ≥ 84% < 92% AFUE	☐ Oil	☐ Electric	☐ Earth Energy

Ratio of Windows, Skylights & Glass (W, S & G) to Wall Area		**Other Building Characteristics**		
Area of walls= _____m^2 or _____ft^2	W, S & G % = _____	☐ Log/Post & Beam	☐ ICF Above Grade	☐ ICF Basement
		☐ Slab-on-ground	☐ Walkout Basement	
		☐ Air Conditioning	☐ Combo Unit	
Area of W, S & G= _____m^2 or _____ft^2	Utilize window averaging: ☐ Yes ☐ No	☐ Air Sourced Heat Pump (ASHP)		
		☐ Ground Sourced Heat Pump (GSHP)		

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

Energy Efficiency Substitutions

☐ ICF (3.1.1.2.(5) & (6) / 3.1.1.3.(5) & (6))
☐ Combined space heating and domestic water heating systems (3.1.1.2.(7) / 3.1.1.3.(7))

☐ Airtightness substitution(s)	☐ Table 3.1.1.4.B	Required:_____	Permitted Substitution:_____
Airtightness test required (Refer to Design Guide Attached)	☐ Table 3.1.1.4.C	Required:_____	Permitted Substitution:_____
		Required:_____	Permitted Substitution:_____

Building Component	**Minimum RSI / R values or Maximum U-Value**		**Building Component**	**Efficiency Ratings**	
Thermal Insulation	Nominal	Effective	**Windows & Doors** Provide U-Value(1) or ER rating		
Ceiling with Attic Space			Windows/Sliding Glass Doors		
Ceiling without Attic Space			Skylights/Glazed Roofs		
Exposed Floor			**Mechanicals**		
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^2●K) or Btu/(h●ft^2●F) but not both

E. Designer(s) [names(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 / License #	Signature

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.

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^2/m^2	1.81 $in^2/100ft^2$	0.93 $L/s/m^2$	0.18 $cgm50/ft^2$
Attached dwelling	3.0	2.12 cm^2/m^2	3.06 $in^2/100ft^2$	1.32 $L/s/m^2$	0.26 $cgm50/ft^2$

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.

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FORM A.5.2
ENERGY EFFICIENCY DESIGN SUMMARY
PERFORMANCE & OTHER ACCEPTABLE COMPLIANCE METHODS

(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 Performance or Other Acceptable Compliance Methods described in Subsections 3.1.2. and 3.1.3. of SB-12,

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.

For use by Principal Authority	
Application number:	Model/Certification Number

A. Project Information			
Building number, street name		Unit number	Lot/con.
Municipality	Postal code	Plan number/other description	

B. Compliance [indicate the building code compliance option being employed in this house design]	
☐ SB-12 Performance* [SB-12 – 3.1.2.]	*Attach energy performance results using an approved software (see guide)
☐ ENERGY STAR®* [SM-12 – 3.1.3.]	*Attach Builder Option Package [BOP] form
☐ R-2000® *[SB-12 – 3.1.3.]	*Attach R-2000 HOT2000 Report

C. Project Building Design Conditions

Climatic Zone (SB-1):	**Heating Equipment Efficiency**	**Space Heating Fuel Source**		
☐ Zone 1 (< 5000 degree days)	☐ ≥ 92% AFUE	☐ Gas	☐ Propane	☐ Solid Fuel
☐ Zone 2 (≥ 5000 degree days)	☐ ≥ 84% < 92% AFUE	☐ Oil	☐ Electric	☐ Earth Energy

Ratio of Windows, Skylights & Glass (W, S & G) to Wall Area		**Other Building Characteristics**		
Area of walls= _____m^2 or _____ft^2	W, S & G % = _____	☐ Log/Post & Beam	☐ ICF Above Grade	☐ ICF Basement
		☐ Slab-on-ground	☐ Walkout Basement	
		☐ Air Conditioning	☐ Combo Unit	
Area of W, S & G= _____m^2 or _____ft^2		☐ Air Sourced Heat Pump (ASHP)		
		☐ Ground Sourced Heat Pump (GSHP)		

SB-12 Performance Reference Building Design Package indicating the prescriptive package to be compared for compliance

SB-12 Referenced Building Package (input design package): Package:_____ Table:_____

D. Building Specifications [provide values and ratings of the energy efficiency components proposed, or attach ENERGY STAR BOP form]

Building Component	**Minimum RSI / R values or Maximum U-Value**		**Building Component**	**Efficiency Ratings**	
Thermal Insulation	Nominal	Effective	**Windows & Doors** Provide U-Value(1) or ER rating		
Ceiling with Attic Space			Windows/Sliding Glass Doors		
Ceiling without Attic Space			Skylights/Glazed Roofs		
Exposed Floor			**Mechanicals**		
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^2●K) or Btu/(h●ft^2●F) but not both

E. Performance Design Verification [Subsection 3.1.2. Performance Compliance]

The annual energy consumption using Subsection 3.1.1. SB-12 Reference Building Package is _____GJ (1 GJ = 1000MJ)

The annual energy consumption of this house as designed is _____GJ

The software used to simulate the annual energy use of the building is:_____

The building is being designed using an air tightness baseline of:

☐ OBC reference ACH, NLA or NLR default values (no depressurization test required)

☐ Targeted ACH, NLA or NLR. Depressurization test to meet _____ ACH50 or NLA or NLR

☐ Reduction of overall thermal performance of the proposed building envelope is not more than 25% of the envelope of the compliance package it is compared against (3.1.2.1.(6)).

☐ Standard Operating Conditions Applied (A-3.1.2.1. – 4.6.2.)

☐ Reduced Operating Conditions for Zero-rated homes Applied (A-3.1.2.1. – 4.6.2.5.)

☐ On Site Renewable(s): Solar:_____

Other Types:_____

F. ENERGY STAR or R-2000 Performance Design Verification [Subsection 3.1.3. Other Acceptable Compliance Methods]

☐ The NRCan "ENERGY STAR for New Homes Standard Version 12.6" technical requirements, applied to this building design result in the building performance meeting or exceeding the prescriptive performance requirements of the Supplementary Standard (A-3.1.3.1.)

☐ The NRCan, "2012 R-2000 Standard" technical requirements, applied to this building design result in the building performance meeting or exceeding the prescriptive performance requirements of the Supplementary Standard SB12

Performance Energy Modeling Professional	
Energy Evaluator/Advisor/Rater/CEM Name and Company:	Accreditation or Evaluator/Advisor/Rater License #
ENERGY STAR or R-2000	
Energy Evaluator/Advisor/Rater/ Name and Company:	Evaluator/Advisor/Rater License #

G. Designer(s) [names(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 / License #	Signature

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.

Guide to the Energy Efficiency Design Summary Form for Performance & Other Acceptable Compliance Methods

COMPLETING THE FORM

B. Compliance Options

Indicate the compliance option being used.

- SB-12 Performance refers to the method of compliance in Subsection 3.1.2. of SB-12. Using this approach the designer must use recognized energy simulation software (such as HOT2000 V10.51 or newer), and submit documents which show that the annual energy use of the proposed building is equal to or less than a prescriptive (referenced) building package.
- ENERGY STAR houses must be designed to ENERGY STAR requirements and verified on completion by a licensed energy evaluator and/or service organization. The ENERGY STAR BOP form must be submitted with the permit documents.
- R-2000 houses must be designed to the R-2000 Standard and verified on completion by a licensed energy evaluator and/or service organization. The HOT2000 report must be submitted with the permit documents.

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. 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. Refer to SB-12 for further details.

E. Performance Design Summary

A summary of the performance design applicable only to the SB-12 Performance option.

F. ENERGY STAR or R-2000 Performance Method

Design to ENERGY STAR or R-2000 Standards.

G. 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 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 3.1.2.1. are not requirements. The Table is not intended to require or suggest that the building meet those airtightness targets. They are provided only as default or reference values for the purpose of annual energy simulations, should the builder/owner decide to perform such simulations. They are given in three different metrics; ACH, NLA, NLR. Any one of them can be used. They can be used as a default values for both a reference and proposed building or, where an air leakage test is conducted and credit for airtightness is claimed, the airtightness values in Table 3.1.2.1. can be used for the reference building and the actual leakage rates obtained from the air leakage test can be used as inputs for the proposed building.

OBC Reference Default Air Leakage Rates (Table 3.1.2.1.)

Detached dwelling	3.0 ACH50	NLA 2.12 cm^2/m^2	NLR 1.32 $L/s/m^2$
Attached dwelling	3.5 ACH50	NLA 2.27 cm^2/m^2	NLR 1.44 $L/s/m^2$

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 Performance option is used and an air tightness of less than 3.0 ACH @ 50 Pa (or NLA or NLR equivalent) in the case of detached houses, or 3.5 ACH @ 50 Pa (or NLA or NLR equivalent) in the case of attached houses is necessary to meet the required energy efficiency standard.

ENERGY EFFICIENCY LABELING FOR NEW HOUSES

ENERGY STAR and R-2000 may issue labels for new homes constructed under their energy efficiency programs. The building code does not currently regulate or require new home labeling.

BROCKVILLE
CITY OF THE 1000 ISLANDS

FORM A.6
RESIDENTIAL MECHANICAL VENTILATION AND HVAC DESIGN SUMMARY

RESET

RESIDENTIAL MECHANICAL VENTILATION DESIGN SUMMARY

for design and performance of residential ventilation systems to OBC 2024 - 9.32

1. Location
Municipality: _____
Civic Address: _____

2. Builder
Name: _____
Address: _____
City: _____ Postal Code: _____
Ph: _____ Fax: _____

3. Designer
Name: _____
Address: _____
City: _____ Postal Code: _____
Ph: _____ Fax: _____
HRAI #: _____
E-mail: _____

4. Combustion Appliances
- ☐ a) Direct Vent
- ☐ b) Induced Draft
- ☐ c) Natural Draft
- ☐ d) Solid Fuel Appliances
- ☐ e) No Combustion Appliances
- ☐ CO Alarm Required

5. Heating System
- ☐ Forced Air
- ☐ Non-Forced Air
- ☐ Gas
- ☐ Propane
- ☐ Other
- ☐ Oil
- ☐ Electricity

6. Distribution System
- ☐ Furnace
- ☐ Inline fan
- ☐ HRV/ERV

7. Principal Ventilation System Design Option
- ☐ Exhaust only forced air distribution system
  (Circ. fan at least 5 times the capacity of the principal exhaust)
- ☐ Balanced no heat recovery
- ☐ HRV/ERV with extended exhaust
- ☐ HRV/ERV with simplified exhaust
- ☐ HRV/ERV with full ducting/not coupled to forced air
- ☐ HRV/ERV with no supplemental fans
  (High speed must be at least 2.5 times the principal exhaust)
- ☐ Supplemental fans

8. Principal Ventilation Capacity (PVC)
# of Bedrooms: _____ Required Exh Airflow: _____ CFM
Supply Air Required: ☐ Yes ☐ No
Mixed Air Temperature Calculation Required:
☐ Yes ☐ No
For a System coupled with a Forced Air Furnace:
Furnace Blower Rate: _____ CFM
Max Allowable Outdoor Airflow as per NBC 9.32.3.4.(2):
_____ CFM

9. Principal Ventilation Fan
☐ HRV/ERV ☐ Central Inline Fan ☐ Bathroom Fan
Location: _____
Manufacturer: _____
Model: _____ ☐ HVI Rated
Design Airflow: Low: _____ CFM High: _____ CFM
Sones: _____ ESP: _____ " w.c.

_____ % Sensible Efficiency @ 0 ºC @ _____ CFM
_____ % Sensible Efficiency @ -25 ºC @ _____ CFM
(If HRV/ERV is used, the system must also comply with SB-12)

10. Other Ventilation Fans
Location: _____ Sones: _____
Manufacturer: _____
Model: _____ ☐ HVI Rated
Design Airflow: _____ CFM ESP: _____ "w.c.
☐ Supplemental Fan ☐ Supply Fan for Principal Exhaust
☐ Circulation Fan ☐ Make-up Air Fan for _____

Location: _____ Sones: _____
Manufacturer: _____
Model: _____ ☐ HVI Rated
Design Airflow: _____ CFM ESP: _____ "w.c.
☐ Supplemental Fan ☐ Supply Fan for Principal Exhaust
☐ Circulation Fan ☐ Make-up Air Fan for _____

Location: _____ Sones: _____
Manufacturer: _____
Model: _____ ☐ HVI Rated
Design Airflow: _____ CFM ESP: _____ "w.c.
☐ Supplemental Fan ☐ Supply Fan for Principal Exhaust
☐ Circulation Fan ☐ Make-up Air Fan for _____

Location: _____ Sones: _____
Manufacturer: _____
Model: _____ ☐ HVI Rated
Design Airflow: _____ CFM ESP: _____ "w.c.
☐ Supplemental Fan ☐ Supply Fan for Principal Exhaust
☐ Circulation Fan ☐ Make-up Air Fan for _____

11. Designer Consent
I _____ certify this ventilation system is designed to be in accordance with OBC-2024 9.32

Date: _____ Signature: _____

Conversion note: 1 L/s = 2 CFM (For hard conversion, use 1 L/s = 2.118 CFM)
Note: Secondary suite ventilation system requires a separate design

BROCKVILLE
CITY OF THE 1000 ISLANDS

FORM A.7.1
DEMOLITION PERMIT APPLICATION CHECKLIST

For use by Principal Authority	
Application number:	Permit number (if different):
Date received:	Roll number:

A. Project Information			
Building number, street name		Unit number	Lot/con.
Municipality	Postal code	Plan number/other description	

This information sheet has been prepared to assist individuals to complete demolition permit applications with minimal delay. The City of Brockville Building By-law provides that demolition permit applications are to be accompanied by plans, specification and documentation which will be considered by the Chief Building Official in determining whether a demolition permit will be issued. The City of Brockville is seeking to ensure that demolitions conform with the *Building Code Act* and that they proceed in an environmentally safe and sound manner.

It is often difficult for a building owner or demolition contractor to determine whether contaminated substances are present in a building and/or on a proposed demolition site. As a general rule, buildings with a history of industrial use have a high probability of containing one or more contaminated substances.

B. Ontario Building Code		
1. Does the building exceed 3 stories in Building Height? *Number of storeys – Above grade:*_____ *Number of storeys – Below Grade:* _____	☐ Yes	☐ No
2. Does the Building exceed 600m² (6458 ft²) in Building Area? *Area of building to be demolished (m² or ft²)* _____	☐ Yes	☐ No
3. Does the building contain pre-tensioned or post-tensioned members?	☐ Yes	☐ No
4. Will the proposed demolition extend below the level of the footings of any adjacent building and occur within the angle of repose of the soil, drawn from the bottom of such footings?	☐ Yes	☐ No
5. Will there be any explosives or lasers used during the course of demolition?	☐ Yes	☐ No

If the answer to any of questions **1 to 5** is **YES**, the applicant shall, as required by the *Building Code Act*, retain a Professional Engineer to undertake the general review of the project during demolition. Further, the applicant shall submit, at the time of application, a complete General Review Commitment Certificate and a report detailing the structural design characteristic of the building and the method of demolition.

C. Environmental Considerations		
The *Occupational Health and Safety Act* requires the identification of Designated Substances and Hazardous Materials on construction sites. Hazardous Substances are defined under the act to include a long and complete list of over 800 biological, chemical and radioactive agents under the provisions of the Workplace Hazardous Materials Information System (WHMIS)		
6. Is there now or has there been an industrial use of this site?	☐ Yes	☐ No
7. Is there a list of Designated Substances for the site and building as required under the *Occupational Health and Safety Act?*	☐ Yes	☐ No
8. Are there any fluid storage tanks, above or below grade, on site? Note: some underground storage tanks may be located by vent stacks.	☐ Yes	☐ No
9. Are there any outstanding Orders issued by the Ministry of the Environment or the Ministry of Labour in respect of the subject premises or owners?	☐ Yes	☐ No
10. Does the structure contain Polychlorinated Biphenyls (PCB's) as defined under the *Environmental Protection Act?* PCB may be located in various electrical equipment including, but not limited to, light ballasts, transformers, capacitors, etc.	☐ Yes	☐ No
11. Does the structure contain Ozone Depleting Substances which require proper handling in accordance with applicable regulations under the *Environmental Protection Act*?	☐ Yes	☐ No
12. Are there hazardous or "controlled products", as defined by WHMIS, on site? For example, past land uses which might indicate the presence of radioactive materials including dentist offices or veterinary clinics. Other indicators could be pipes containing chemicals, oils or solvents.	☐ Yes	☐ No

An answer of **YES** to any of questions **6 to 12** may indicate the presence of environmentally hazardous substances or building elements which may contravene the *Building Code Act.* If this is the case, the applicant will need to contact an environmental consultant to perform an Environmental Building Audit (including the dust control plan), prior to the submission of the demolition permit application.

Note: Medical Officer of Health and the Minister of the Environment may be consulted by the Chief Building Official to confirm compliance with applicable law.

E. Declaration of Applicant

I _____ declare that:
Print Name

- ☐ That I am the owner/authorized agent of the owner named in the application for a permit
- ☐ That the information supplied to me in the application and in the materials filed by me with the application are correct
- ☐ That I have arranged with the proper authorities for the termination and capping of all services and utilities including, but not limited to water, sewer, gas, electricity, telephone and cable.(**A completed FORM 7.2 is to confirm this has been arranged to the satisfaction of the utility)**

1. The information contained in this application, attached schedules and forms, 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.

_____ _____
Signature of Applicant Date

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.

BROCKVILLE
CITY OF THE 1000 ISLANDS

FORM A.7.2

DEMOLITION AND MOVING UTILITY AUTHORIZATION FORM

Building Address:			
Applicant Name:			
Address:			
Contact #	Tel:	Fax:	Email:

In compliance with the Building By-Law for the Corporation of the city of Brockville, the Ontario Building Code and the Ontario Fire Code, the following authorities must be notified prior to the issuance of a **Demolition or Moving Permit.**

Complete items 1 to 6 for demolition permit or complete items 1 to 7 for moving permit.

1. **BROCKVILLE FIRE DEPT, FIRE PREVENTION OFFICE,** LAURIER BLVD (613) 498-1261 ext 2518

Print Name		Date	
Signature		Position	

2. **HYDRO ONE,** CALL CENTRE, MARKHAM ï Required if meter is to be removed (888) 664-9376

Print Name		Date	
Signature		Position	

3. **ENBRIDGE GAS,** CENTENNIAL ROAD 1-855-228-4898 OPTION 6, OPTION 1

Print Name		Date	
Signature		Position	

4. **BELL CANADA,** 39 APPLE STREET 613demandcell@bell.ca

Print Name		Date	
Signature		Position	

5. **OPERATIONS, PUBLIC WORKS/PARKS,** NORTH AUGUSTA RD. (613) 342-8772 ext 3254
(STORM SEWER)

Print Name		Date	
Signature		Position	

6. **ENVIRONMENTAL SERVICES, ENGINEERING,** NORTH AUGUSTA RD (613) 342-8772 ext 3223
(SANITARY SEWER AND WATER SERVICE)

Print Name		Date	
Signature		Position	

NOTE FOR SIGN-OFFS ON 5 AND 6 – ALL BUILDING SERVICES: SANITARY, STORM AND WATER SERVICE ARE TO BE DISCONNECTED AND CAPPED AT THE PROPERTY LINE TO MEET CITY OF BROCKVILLE STANDARDS. THE CAPPED SERVICES MUST BE INSPECTED BY CITY OF BROCKVILLE STAFF PRIOR TO BEING BACKFILLED. CHECK IF APPLICABLE TO THIS APPLICATION. [ ]

(*Moving Permit Only*)

7. **BROCKVILLE POLICE DEPARTMENT,** PARKEDALE AVENUE

Print Name		Date	
Signature		Position	

A covenant to indemnify and save the Corporation of the City of Brockville harmless from any and all claims, suits or demands with may be brought against it by reason of or arising out of the movement of the ñbuildingsò on or along the public highway, shall be submitted by the permit applicant.

Evidence (i.e. copy of policy) that he has obtained a **policy of insurance** issued by an insurance company licensed to carry on business in the Province of Ontario, **insuring** the **applicant** and the **City of Brockville** in respect of public liability and property damage in the amount of not less than **$5,000,000.00** shall be submitted with permit application for moving permit.

BROCKVILLE
CITY OF THE 1000 ISLANDS

FORM A.8.1.

Application for Approval of an Alternative Solution

Pursuant to the Building Code Act, Section 9 and the Ontario Building Code Div A – 1.2.1.1

For use by Principal Authority	
Application number:	Building Permit number:
Date received:	

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	Building Type		

B. Designer Information ❑ Owner or ❑ Authorized agent of owner

Last name	First name		
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number	Fax	Cell number	
BCIN #	Qualifications		

C. Owner Information

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. Description of Proposed Alternative Solution

E. Supporting Documentation	
❑ Past Performance	
❑ Tests	
❑ Other Evaluations	

F. Applicable Division B Provisions	
Numeric Reference	Summary of Provision

G. Identification of Functional Statements/ Objectives/"Areas of Performance"			
Sentence	F.S.	Objective	Summary of "Areas of Performance"

H. Evaluation of Level of Performance	
Division B Provisions	Proposed Alternative Solution

I. Assumptions, Limiting or Restricting Factors

J. Reason for Proposed Alternative Solution

K. 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.

_____ _____
Date Signature of applicant

Checklist for Application for Evaluation of Alternative Solution:

1. Completed Section A, B and C of this form
2. Completed Section D- Description of Proposed Alternative Solution
3. Completed Section E- Identification of and submission of testing and background information
4. Completed Section F- Code Analysis and Identification of applicable Division B (Acceptable Solution) provisions
5. Completed Section G- Identification of applicable linked pairs of objectives and functional statements
6. Completed Section H- Evaluation of level of Performance of applicable Division B provisions and Evaluation of level of Performance of proposed alternative solution
7. Completed Section I- Identification of assumptions, limiting or restricting factors including any information concerning any special maintenance or operation requirements
8. Payment of applicable fees

Office Use Only

Reviewed By:	BCIN:	Date:

Summary of Proposal

Additional Applicable Division B Provisions not listed by applicant

Numeric Reference	Summary of Provision

Evaluation

Conditions of Approval

Your Application and supporting documentation in support of this application for approval of an Alternative Solution has been reviewed and the application is hereby:

- ❑ Approved
- ❑ Approved subject to Attached Conditions of Approval
- ❑ Refused for the following reasons:
  a)
  b)

Chief Building Official Name: _____ BCIN: _____

Signature: _____

Date: _____

Where an application for the Use of an Alternative Solution has been denied by the Chief Building Official the Applicant may:

a) Appeal the decision to the Building Code Commission under Section 24 of the Building Code Act
b) Appeal the decision to the Superior Court of Justice under Section 25 of the Building Code Act
c) Apply to the Minister for a binding interpretation under Section 28.1 of the Building Code Act
d) Comply with the Acceptable Solution as outlined in Division B of the Ontario Building Code

BROCKVILLE
CITY OF THE 1000 ISLANDS

FORM A.8.2
ALTERNATIVE SOLUTION AUTHORIZATION FORM

A. Project Information

Building number, street name			Unit number	Lot/con.
Municipality	Postal code	Plan number/other description		
Construction Permit Number		Area of work (m^2)		

B. Applicant

Applicant is: ☐ Owner or ☐ 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	

C. Property 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	

D. Declaration of Applicant

I _____ certify that the attached documentation contains the following information:
Print Name

1. Description of proposed material, system or building design.
2. Documentation to support the proposed Alternative Solution in accordance with 2.1.1. of Division C.
3. Applicable Acceptable Solution in Division B of the Building Code.

_____ _____
Signature of Applicant Date

E. Chief Building Official Authorization ☐ Approved ☐ Not Approved

Conditions Imposed:

This authorization is specific to this location only and is not transferrable to any other construction permit.

_____ _____ _____
Chief Building Official (print name) Signature of Chief Building Official Date

Pursuant to Section 9 of the Building Code Act, the Chief Building Official may allow the use of materials, systems and building designs that are not authorized in the Building Code if, in the opinion of the Chief Building Official, the proposed materials, systems or building designs will achieve the level of performance required by the Building Code. Equivalents which are authorized are only applicable to the project and application or permit referenced, and are not transferable. The Chief Building Official may alter and/or revoke all or any of the imposed conditions.

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.

FORM A.9

BROCKVILLE
CITY OF THE 1000 ISLANDS

SOLID FUEL BURNING SPACE HEATING APPLIANCE INFORMATION FORM
ATTACH TO THE APPLICATION FOR BUILDING PERMIT

OWNER:

ADDRESS:

AGE OF HOUSE : _____ YEARS or YEAR BUILT: _____

APPLIANCE: TYPE: STOVE ☐ FIREPLACE ☐ INSERT ☐

MANUFACTURER:

MODEL: *CERTIFIED: YES ☐ NO ☐

FLUE SIZE = | FUEL TYPE: WOOD ☐ COAL ☐ WOOD PELLETS ☐ OTHER ☐

LOCATION: RESIDENCE ☐ GARAGE ☐ SHOP ☐ REPAIR GARAGE ☐ OTHER ☐

INSTALLATION: ALONG WALL ☐ IN CORNER ☐ IN ALCOVE ☐ FIREPLACE HEARTH ☐

REQUIRED CLEARANCES FROM COMBUSTIBLES: SIDE = BACK = TOP =

WALL OR CEILING SHIELDS FOR REDUCED CLEARANCES: YES ☐ NO ☐

SHIELD TYPE & MATERIALS:

FLUE PIPE: TYPE: SINGLE WALL ☐ DOUBLE WALL ☐

FLUE PIPE LENGTH = NUMBER OF 90° ELBOWS = FLUE SIZE =

FLUE PIPE* CERTIFIED: YES ☐ NO ☐ | CLEARANCE FROM COMBUSTIBLES =

CHIMNEY: NEW ☐ EXISTING ☐ | FLUE SIZE =

CHIMNEY TYPE: FACTORY BUILT ☐ MASONRY ☐

FACTORY BUILT CHIMNEY: * CERTIFIED & APPROVED FOR APPLIANCE: YES ☐ NO ☐

MANUFACTURER:

MODEL:

CHIMNEY LOCATION: INSIDE THROUGH BUILDING ☐ OUTSIDE ☐ WITHIN CHASE ☐

CHIMNEY CONNECTION TO FLUE PIPE: THROUGH WALL ☐ THROUGH CEILING ☐

APPLIANCE INSTALLATION MANUAL: ATTACHED ☐

FLUE PIPE INSTALLATION MANUAL: ATTACHED ☐

CHIMNEY INSTALLATION MANUAL: ATTACHED ☐

FLOOR PROTECTION FOR STOVE / TYPE OF PAD MATERIAL:

PAD EXTENSION FROM STOVE / SIDES= SIDES WITH A DOOR=

CARBON MONOXIDE DETECTOR: (INSTALLED ADJACENT TO BEDROOMS) YES ☐ NO ☐

DATE: | APPLICANT SIGNATURE:

*CERTIFIED EQUIPMENT IS LISTED WITH UNDERWRITERS LABORATORIES OF CANADA (ULC) OR WARNOCK HERSEY (WH)

BROCKVILLE
CITY OF THE 1000 ISLANDS

FORM A.10

Application Information for Photo Voltaic System

Product Name:	**Installation Type:** ☐ Flat Roof ☐ Sloped Roof	**Number of Collectors:**
Application No:		
Product Data Sheet (Manufacturers Specifications)		

Contractor Information

Business Name:	Date of Submission:
Name of Contact for Technical Information on PV system:	Phone No:

Collector Information

Collector Size (m2)(width x height)	No. of Collectors	Total Gross Collector Area (m2)	Total Weight (kg)

Engineering

☐ Structural compliance letter re: compliance with the Ontario Building Code

☐ Structural drawing showing all components and connections to the roof.

☐ Technical specification of the sealant or gasket used at the roof penetration points.

BROCKVILLE
CITY OF THE 1000 ISLANDS

FORM A.11

Location Dependent Requirement Declaration Summary

(Tiny Houses Constructed Off-Site [Div. C1.11.1])

This form is used to summarize the assumptions related to the location of the house that have been used in the design of the tiny house constructed off-site.

For use by Principal Authority	
Permit No:	**Model/Identifier Number:**

A. Project Information (where is "Off-site Construction" is taking place)

Building Number, Street name	**Unit Number**
Municipality	**Postal Code**

B. Intended Installation Location (Where is the site the house is intended to be installed on)

☐	The site the house is intended to be installed on is **not** known at this time [**C,D,E,F,G**]
☐	The site the house is intended to be installed on is known to be: [**D,E,F,G**]

Building number, street name	**Unit number**	**Lot/Con**

Municipality	**Postal Code**	**Reg. Plan number/other description**

C. Climatic, Seismic & Temperature Based Design Assumptions

Allowable Soil Bearing Pressure (kPa)		**S_s 1-in-50-year ground snow load (kPa)**	
S_r 1-in-50-year rain load (kPa)		**2.5% January Design Temperature (°C)**	
Degree Days Below 18°C		**Hourly Wind Pressure (1/50) kPa**	
Seismic Spectral response acceleration Sa(0.2)			

D. Spatial Separation Design Assumptions

Exposing Building Face	Minimum Limiting Distance (m)	Total Area of Wall (m^2)	Total Area of Unprotected Openings (m^2)	% Unprotected Openings	Fire Resistance Rating of exposing building face	Cladding Type
						NONCOMBUSTIBLE
						NONCOMBUSTIBLE
						NONCOMBUSTIBLE
						NONCOMBUSTIBLE
						NONCOMBUSTIBLE
						NONCOMBUSTIBLE

E. Fire Fighting Assumptions

☐	☐	It is assumed that the site the house is intended to be installed on will be provided with adequate fire fighting facilities.
☐	☐	It is assumed that the site the house is intended to be installed on will be provided with access for fire department equipment by means of a street, private roadway, or yard.

Yes No

F. Soil Gas Control Assumptions

☐	☐	It is assumed that the site the house is intended to be installed on requires the installation of a Soil Gas mitigation.

Yes No

G. Declaration of applicant

I _____ **declare that**:

(print name)

1. The assumptions for "location-dependant requirements" as noted in this declaration have been used in the design of the house.
2. There is no guarantee/assurance implied that any municipality would permit the installation of the partially constructed house where the "location-dependant requirements" for the site that the house installed on do not correspond with the assumptions made in this declaration.
3. Any purchaser of the partially constructed house will be provided copies all documentation noted in Div.C.1.11.1.2(4) of the Ontario Building Code.
4. The partially constructed house shall only be installed at a site in a municipality where a permit under section 8 of the Act has been issued therefore by the chief building official of that municipality.

_____ _____

Date Signature of Applicant

BROCKVILLE
CITY OF THE 1000 ISLANDS

FORM B
PARTIAL OCCUPANCY PERMIT APPLICATION

For use by Principal Authority	
Application number:	Permit number (if different):
Date received:	Roll number:

A. Project Information

Building number, street name		Unit number	Lot/con.
Municipality	Postal code	Plan number/other description	
Construction Permit Number		Area to be Occupied (m^2)	

B. Purpose of Application

Proposed use of building	Expected Date of Occupancy
Description of Request	

C. Applicant

Applicant is: ☐ Owner or ☐ 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. Property 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. Declaration of Applicant

I _____ declare that:
Print Name

1. The information contained in this application, attached schedules and forms, 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.

_____ _____
Signature of Applicant Date

IF THE APPLICANT IS NOT THE OWNER OF THE PROPERTY, COMPLETE THE FOLLOWING

I, _____ hereby authorize _____
Print name of **Owner** Print name of **Applicant**

to be my authorized agent and request that the permit be made out in his/her name. Please direct all correspondence to this individual, who will be acting on my behalf.

_____ _____
Signature of **Owner** Date

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.

BROCKVILLE
CITY OF THE 1000 ISLANDS

FORM C

PLANS RESUBMISSION APPLICATION

A. Project Information			
Building number, street name		Unit number	Lot/con.
Municipality	Postal code	Building Permit Number	

B. Purpose of Application
Describe the change to the plans:

C. 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. Declaration of Applicant

I _____ declare that:
Print Name

- ☐ That I am the owner/authorized agent of the owner named in the application for a permit
- ☐ That the information supplied to me in the application and in the materials filed by me with the application are correct
- ☐ Revised plans and specifications illustrating the changes, including all supporting documentation are being provided with this application

1. The information contained in this application, attached schedules and forms, 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.

_____ _____
Signature of Applicant Date

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.

BROCKVILLE
CITY OF THE 1000 ISLANDS

FORM A.12.

AGENT OF RECORD LETTER

(If the Owner is NOT the Applicant)

(If Multiple Owners, An Authorization Letter from Each Owner is Required)

- **PLEASE PRINT –**

If an agent is employed the owner(s) must complete the following:

I, (we)

……

(name(s) of owner, individuals or company)

Being the registered owner(s) of the subject property, hereby authorize ……

(name of agent)

To prepare, submit and obtain a building permit, on my behalf, for the project at:

……..

(property address)

……. ……

(signature of owner) (signature of agent)

……. / ……. / ……

(day) (month) (year)

BROCKVILLE
CITY OF THE 1000 ISLANDS

FORM D
TRANSFER OF PERMIT APPLICATION

A. Project Information			
Building number, street name		Unit number	Lot/con.
Municipality	Postal code	Building Permit Number	

B. Type of Permit		
☐ New Construction	☐ Addition to an Existing Building	☐ Alteration/Repair
☐ Demolition	☐ Sign	☐ Change of Use
☐ Conditional Permit	☐ Other:	

C. Original 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	

As the **ORIGINAL APPLICANT**, I HEREBY grant permission to transfer Building Permit #_____ for the above noted location to the New Applicant named below.

_____ _____
Original Applicant's Signature Date

D. Property 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	

As the **PROPERTY OWNER**, I HEREBY consent to the Permit transfer and acknowledge receiving a copy of this application.

_____ _____
Owner's Signature Date

E. New 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	

As the **NEW APPLICANT**, I HEREBY acknowledge the Permit transfer and agree to pay any applicable fee(s) prior to issuance of the Permit.

_____ _____
New Applicant's Signature Date

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.