



Application Date: \_\_\_\_\_  
 Plan Checker: \_\_\_\_\_  
 Phone #: \_\_\_\_\_

**APPLICATION FOR NEW COMMERCIAL MULTI-RESIDENTIAL INDUSTRIAL BUILDINGS AND ADDITIONS**

**Building Address:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Legal Description:** Lot: \_\_\_\_\_ Block: \_\_\_\_\_ D.L. \_\_\_\_\_ **Plan:** \_\_\_\_\_

**Proposed Use:** \_\_\_\_\_ **Project Value:** \$ \_\_\_\_\_

**Project Name/Description:** \_\_\_\_\_ **Demolition Required:**  Yes  No **Number of plans submitted:** \_\_\_\_\_

**Building Owner (s):** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**C.R.P.:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Contractor:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Business License (IMBL):** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Preferred Contact:**  
Agent Authorization Form Required

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

I acknowledge that the permit application fee is non-refundable.

The information on this form is collected under the authority of the current Burnaby Building Bylaw and is in accordance with the Freedom of Information and Protection of Privacy Act. The purpose of the collection is to process your application for a building permit. It will be retained as a record of your application and may be used to contact the parties involved in this project. The name of the applicant, the name and address of the business associated with the application, the address to which the permit pertains, and the value of the work being done may be made available to the general public. If you have any questions about the collection and use of this information, please contact the Building Department at 604-294-7130.

Applicant (Print Name): \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR STAFF USE ONLY**

**SUBMISSION CHECKLIST**

	Incl.	To Come	N/A	SCH. B		Incl.	To Come	N/A
Architectural Drawings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Energy Modelling Report & Checklist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Structural Drawings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire Truck Access Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Piling Drawings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Designated Structural Engineer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical/Plumbing Drawings (c/w site service)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Alternative Solution Reports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Drawings (c/w load calculations)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Schedule A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Soils Report & Methane Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Schedules B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Methane Ventilation System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Schedule E1 (Residential Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Truss Layout	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Schedule F (Owner's Undertaking)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BC Land Survey (2 copies)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Encroachment Letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building Code Analysis Summary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	New Home Registration Form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building Code Compliance Checklist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Agent Authorization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Note: All of the above items must be original, signed, sealed and dated (except for Schedule F, Agent Authorization & New Home Registration Form)

**P.P.A. Required:**  Yes  No **P.P.A. Approval #:** \_\_\_\_\_ **P.P.A. Approval Date:** \_\_\_\_\_

**Comments**

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**Building Permit #:** \_\_\_\_\_ **Excavation Permit #:** \_\_\_\_\_ **Tree Permit #:** \_\_\_\_\_

**Foundation Permit #:** \_\_\_\_\_ **Alternative Solution #:** \_\_\_\_\_ **Issue Date:** \_\_\_\_\_ **Initial:** \_\_\_\_\_