



City of Burnaby
 Building Division
 Planning and Development Department
 4949 Canada Way, Burnaby, BC V5G 1M2
 Phone: 604-294-7130 Fax: 604-294-7986



Application Date: _____
 Plan Checker (PC): _____
 PC E-mail: _____
 PC Phone Number: _____

TENANT IMPROVEMENT APPLICATION FORM

STAFF USE ONLY

SITE ADDRESS:

PPA Required: Yes No **PPA Approval #: PPA** _____ **PPA Approval Date:** _____

Submission Checklist

	<u>Incl.</u>	<u>To Come</u>	<u>N/A</u>		<u>Incl.</u>	<u>To Come</u>	<u>N/A</u>
Schedule "F" (Owner's Undertaking)	<input type="checkbox"/>	<input type="checkbox"/>		Architectural Drawings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agent Authorization Form	<input type="checkbox"/>	<input type="checkbox"/>		Structural Drawings (including racking)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consent to Construction Form (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electrical Drawings (load calculations)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Schedule A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing Drawings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Schedule B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mechanical Drawings (kitchen exhaust system)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Schedule E1 (Residential only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Alternative Solution Report(s)	<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 Form & New Home Registration Form

CIRCULATION

	<u>Req'd</u>	<u>Date Forwarded</u>	<u>Date Returned</u>		<u>Req'd</u>	<u>Date Forwarded</u>	<u>Date Returned</u>
Fire Prevention	<input type="checkbox"/>	_____	_____	Engineering – Development Services	<input type="checkbox"/>	_____	_____
Fraser Health Authority	<input type="checkbox"/>	_____	_____	Electrical (Building Division)	<input type="checkbox"/>	_____	_____
Heritage LRP	<input type="checkbox"/>	_____	_____	Plumbing & Gas	<input type="checkbox"/>	_____	_____
Climate Action & Energy	<input type="checkbox"/>	_____	_____				

Comments:

Building Permit: BLD	Bylaw Case: BYL	
	Bylaw Officer: _____	