



Building Division, Planning and Development Department  
2<sup>ND</sup> Floor, 4949 Canada Way, Burnaby, BC V5G 1M2  
Phone: 604-294-7130

## BUILDING PERMIT APPLICATION CERTIFIED PROFESSIONAL (CP) PROGRAM

Application Date: \_\_\_\_\_

### Section 1: Property Information

<b>SITE ADDRESS:</b>		<b>POSTAL CODE:</b>	
<b>LEGAL DESCRIPTION:</b>			
<b>This application is to:</b> (Check applicable box)	<input type="checkbox"/> <b>Construction of New Building(s)</b>	<b>Number of Residential Units:</b>	
	<input type="checkbox"/> <b>Tenant Improvement</b> prior to shell building occupancy (PPA required for exterior alterations and change of use)	<b>Master/Shell Building Permit Number:</b> <b>BLD</b>	
		<b>FLOOR LEVEL:</b>	<b>SUITE NUMBER:</b>
<b>Permits required for:</b>	<u>Sprinkler Permit</u> <input type="checkbox"/> YES / <input type="checkbox"/> NO	<u>Demolition Permit</u> <input type="checkbox"/> YES / <input type="checkbox"/> NO	<u>Tree Permit</u> <input type="checkbox"/> YES / <input type="checkbox"/> NO
<b>PROJECT VALUE:</b>	\$ _____	\$ _____	\$ _____
<b>Provide Breakdown:</b>	Total (all stages)	Excavation and Shoring	Foundation to Grade
<b>Full (Remainder Scope)</b>			
<b>DESCRIPTION OF WORK TO BE DONE (including proposed uses, permit staging, building information, and any unique features if proposed):</b>			

### Section 2: Certified Professional

<b>COMPANY NAME:</b>	<b>BUSINESS LICENSE/ACCOUNT:</b>	
<b>CERTIFIED PROFESSIONAL:</b>		
<b>ADDRESS:</b>	<b>CITY:</b>	<b>POSTAL CODE:</b>
<b>PHONE NUMBER(S):</b>	<b>EMAIL:</b>	

### Section 3: Registered Property Owner(s):

<b>PROPERTY OWNER:</b>		
<b>ADDRESS:</b>	<b>CITY:</b>	<b>POSTAL CODE:</b>
<b>PHONE NUMBER(S):</b>	<b>EMAIL:</b>	

### Section 4: Tenant

<b>TENANT'S NAME:</b>	<b>Is the base building owner aware of this application?</b>	
<b>ADDRESS:</b>	<b>CITY:</b>	<b>POSTAL CODE:</b>
<b>PHONE NUMBER(S):</b>	<b>EMAIL:</b>	

### Section 5: Contractor Business License Name

<b>CONTRACTOR:</b>	<b>Business License (IMBL or Burnaby):</b>	
<b>ADDRESS:</b>	<b>CITY:</b>	<b>POSTAL CODE:</b>
<b>PHONE NUMBER(S):</b>	<b>EMAIL:</b>	

### Section 6: Authorized Agent for Owner Agent Authorization Form Required (General Building Information → Forms)

<b>AUTHORIZED AGENT:</b>		
<b>ADDRESS:</b>	<b>CITY:</b>	<b>POSTAL CODE:</b>
<b>PHONE NUMBER(S):</b>	<b>EMAIL:</b>	
<b>Who will be paying for the application fees:</b> <input type="checkbox"/> CP <input type="checkbox"/> Tenant/Lessee <input type="checkbox"/> Property Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Authorized Agent <input type="checkbox"/> Other:		

Note: Separate permits are required for electrical, plumbing, gas installation, alterations of sprinklers and illuminated signs.  
Letters of Assurance for sprinkler installation must be submitted at time of application for sprinkler permits.

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

Personal information collected on this form is in accordance with s. 26(c) of the Freedom of Information and Protection of Privacy Act (RSBC 1996) for permitting purposes. Please be advised that permits are considered public records that are available in various City publications or disclosed through information requests. For questions regarding the collection, use and disclosure of personal information please contact the FOI Administrator at FOI@burnaby.ca or by calling 604-294-7944 or in person at City Hall at 4949 Canada Way, Burnaby.

**Certified Professional:** \_\_\_\_\_  
Print Name Signature Date