

BUILDING APPLICATION CHECKLIST – SOLAR PHOTOVOLTAIC PROJECTS

Ex: Roof-mounted solar projects

NOTE: Applications may be refused if the first six (6) documents are not submitted together.

Building permit application Professional Engineer report verifying the structural adequacy of the building to support the additional load of the proposed solar panels Solar panel layout plan/drawings Aerial view of building showing where roof-mounted solar panels are to be installed Owner Responsibilities form Agent Authorization form (if applicant is not the property owner) Deed or tax bill (proof of land ownership)

An in-depth plans examination may reveal that further information may be required from the applicant to satisfy compliance with the Ontario Building Code or other applicable law. Total fees will be determined during the building inspector's review.

Optional pre-application meetings are available for applicants to discuss their proposed project with the Permit Intake Coordinator. Please see the website to complete the 'Building Permit Pre-application Meeting Intake Form' and see what is required.



Application for a Permit to Construct or Demolish This form is authorized under subsection 8(1.1) of the Building Code Act.

For use by Principal Authority					
Application number: Permit number (if different):					
Date received:	ved: Roll number:				
Application submitted to:Township	of South Fro	ontenac	<u>.</u>		
A. Project information					
Building number, street name				Unit number	Lot/con.
Municipality	Postal code		Plan number/other o	description	
Project value est. \$			Area of work (m ²)		
B. Purpose of application			<u> </u>		
q New construction q Addition t existing b		q Altera	ation/repair q	Demolition q	Conditional Permit
Proposed use of building	Curre	ent use of	building		
Description of proposed work					
C. Applicant Applicant is: q Owner or q Authorized agent of owner					
Last name	First name		Corporation or partn	ership	
Street address				Unit number	Lot/con.
Municipality	Postal code		Province	E-mail	
Telephone number ()	Fax ()			Cell number ()	
D. Owner (if different from applicant)	1				
Last name	First name		Corporation or partn	ership	
Street address				Unit number	Lot/con.
Municipality	Postal code		Province	E-mail	
Telephone number ()	Fax ()			Cell number ()	

E. Builder (optional)						
Last name	First name	Corporation or partners	hip (if applicabl	e)		
Street address			Unit number	L	ot/con.	
Municipality	Postal code	Province	E-mail	<u> </u>		
Telephone number ()	Fax ()	<u> </u>	Cell number ()			
F. Tarion Warranty Corporation (Ontario	New Home Warrant	y Program)	L			
i. Is proposed construction for a new hor <i>Plan Act</i> ? If no, go to section G.			es q	Yes	q	No
ii. Is registration required under the Onta	rio New Home Warrantie	s Plan Act?	q	Yes	q	No
iii. If yes to (ii) provide registration numbe	r(s):					
G. Required Schedules			-			
i) Attach Schedule 1 for each individual who rev	iews and takes responsi	bility for design activities.				
ii) Attach Schedule 2 where application is to con-	struct on-site, install or re	pair a sewage system.				
H. Completeness and compliance with a	applicable law					
 This application meets all the requirements of Building Code (the application is made in the applicable fields have been completed on the schedules are submitted). 	correct form and by the o	owner or authorized agen		Yes	q	No
Payment has been made of all fees that are r regulation made under clause 7(1)(c) of the <i>E</i> is made.				Yes	q	No
ii) This application is accompanied by the plans resolution or regulation made under clause 7(r-law, q	Yes	q	No
iii) This application is accompanied by the inform law, resolution or regulation made under clau the chief building official to determine whethe contravene any applicable law.	se 7(1)(b) of the Building	Code Act, 1992 which er	nable	Yes	q	No
iv) The proposed building, construction or demol	ition will not contravene a	any applicable law.	P	Yes	q	No
I. Declaration of applicant						
				decla	re that:	
(print name)				_ueua	io inal.	
 The information contained in this applic documentation is true to the best of my If the owner is a corporation or partners 	knowledge.			other	attached	

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., 2nd Floor. Toronto, M5G 2E5 (416) 585-6666.

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	s responsibili	ty for design activities		
Name		Firm		
Street address		1	Unit no.	Lot/con.
Municipality	Postal code	Province	E-mail	
Telephone number	Fax number	Cell number		
C. Design activities undertaken by i Division C]	ndividual ide	ntified in Section B. [Bui	Iding Code Table	e 3.5.2.1. of
q House	q HVAC ·	– House	q Building Str	uctural
q Small Buildings	q Building	g Services	q Plumbing –	House
q Large Buildings		on, Lighting and Power		All Buildings
Complex Buildings	q Fire Pro	otection	q On-site Sev	age Systems
Description of designer's work				
D. Declaration of Designer				
D. Declaration of Designer				
1		de	clare that (choose c	one as appropriate):
(print nan	ne)			
 I review and take responsibility C, of the Building Code. I am of Individual BCIN: 	qualified, and th	e firm is registered, in the app	tered under subsect propriate classes/ca	ion 3.2.4.of Division tegories.
Firm BCIN:				
q I review and take responsibility	/ for the design :	and am qualified in the appro	priate category as a	n "other designer"
under subsection 3.2.5.of Divi	sion C, of the Bu	uilding Code.		C C
Basis for exemption from	registration:			
q The design work is exempt fro Basis for	m the registratic exem	ption from	ents of the Building (registration	Code. and
qualification:		<pre> I certify that:</pre>		
 The information contained in this s I have submitted this application w 				
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) d).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.

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 Association of Professional Engineers of Ontario.



OWNER RESPONSIBILITIES

Project location information:

Property owner(s):				
Project address:				
Phone #:		Email:		
Roll #:				
Concession:	Lot:	Part:	R Plan #: _	
To the Township of So	outh Frontena	С,		

I declare that; I am owner listed above , or;

I am the authorized agent of the property owner listed above

As the owner/agent I hereby acknowledge;

- That the issuance of a Building Permit and/or a general site review by the Building Department Staff is not confirmation that all zoning setbacks have been adhered to. This includes but is not limited to separation of structures to the high water mark, lot lines, sewage systems and other structures. It is understood that it is the sole responsibility of the owner/agent to meet the setback requirements as set out in the South Frontenac Zoning Bylaw 2003-75, and;
- That an Occupancy Permit **must be issued by a Township Building Official prior to any occupancy** of a seasonal or permanent residence and;
- The owner(s) are obligated to arrange for the inspections indicated on the permit card issued for the project, and that no work will proceed until the Building Inspector has inspected the various stages of construction indicated on the permit card, and;
- Permit drawings and documents submitted with errors or omissions contained therein do not relieve the owner and/or authorized agent from the responsibility of completing all work to meet or exceed the requirements of the Ontario Building Code.
- If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

Signature

Date

Note: The Ontario Building Code Act requires that request for inspections is made a minimum 2 regular business days in advance of the regular business day upon which the inspection is needed.



Agent/Owner Authorization Form

Permit #: PR

A. Project location:				
Street address:				
B. Authorized agent of ov	vner:			
Last name:		First name:	Corporation/partner	ship:
Street address:			Postal code:	Province:
Phone number:	Cell r	number:	E-mail:	

C. Parties authorized to receive inspection reports:		Trade	All
Company/Contractor	Contact email	specific reports	

D. Declaration of Owner:

I, ______, being the registered owner of the above noted property hereby authorize the party stated in Section B of this form to make application for permit on my behalf to Building Services of the Township of South Frontenac in accordance with the applicable requirements of the Ontario Building Code for the purpose of the identified project.

All parties identified in Section C are hereby authorized to receive inspection reports as outlined above.

I, as the registered owner of the above noted property, wish to be copied on all communication throughout the application and review process.

I, as the registered owner of the above noted property, wish to receive a copy of all inspection reports.

Date:	Signature:
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Note: It is the responsibility of the owner/authorized agent to provide the contact information in Section C and to update this information if there are any changes. If this information is not provided, any assigned inspection reports will only be sent to the applicant for the above noted project.