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:			Roll nur	Roll number:					
Application submitted to:	(Name of municipali	ty, upper-tier r	municipality, bo	pard of health or c	conservatio	n authority)			
A. Project information									
Building number, street nan		Unit number Lot/con.				Lot/con.			
Municipality Postal code			е	Plan number/		cription			
Project value est. \$				Area of work ((m ²)				
B. Purpose of applicat	tion								
☐ New construction	Addition to existing be	uilding		ation/repair		Demolition		Conditional Permit	
Proposed use of building (urrent use of	building					
Description of proposed wo									
C. Applicant	Applicant is:			Authorized					
Last name		First name		Corporation o	r partners	nıp			
Street address						Unit number		Lot/con.	
Municipality		Postal code		Province		E-mail			
Telephone number Fax ()				Cell number ()					
D. Owner (if different f	rom applicant)								
, ,				Corporation o	orporation or partnership				
Street address						Unit number		Lot/con.	
Municipality		Postal code	е	Province		E-mail			
Telephone number ()		Fax ()				Cell number ()			

E. Builder (optional)							
Last name	First name	Corporation or partnersh	nip (if applica	able)			
Street address	Unit numbe	number Lot/con.					
Municipality	Postal code Province E-ma			mail			
Telephone number ()	Fax ()		Cell numbe	r			
F. Tarion Warranty Corporation (Ontario	o New Home Warran	ity Program)					
i. Is proposed construction for a new home as defined in the <i>Ontario New Home Warranties</i> Plan Act? If no, go to section G.					es 🔲	No	
ii. Is registration required under the Ontar	io New Home Warrantie	es Plan Act?		☐ Ye	es 🗆	No	
iii. If yes to (ii) provide registration number	·(s):				•		
G. Required Schedules	(-)-						
i) Attach Schedule 1 for each individual who rev	iews and takes respons	sibility for design activities.					
ii) Attach Schedule 2 where application is to con	struct on-site, install or r	repair a sewage system.					
H. Completeness and compliance with	applicable law						
						No	
Payment has been made of all fees that are required, under the applicable by-law, resolution or						No	
ii) This application is accompanied by the plans resolution or regulation made under clause 7	-law,	☐ Ye	es 🗆	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 <i>Building Code Act, 1992</i> which enable the chief building official to determine whether the proposed building, construction or demolition will contravene any applicable law.					es 🗆	No	
iv) The proposed building, construction or demol		☐ Ye	es 🔲	No			
I. Declaration of applicant							
[] (print name)				dec	lare that:		
 The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge. 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., 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 Lot/con. Unit no. 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 C1** ☐ House ■ HVAC – House ■ Building Structural ■ Small Buildings ■ Building Services ☐ Plumbing – House ■ Large Buildings ■ Detection, Lighting and Power ☐ Plumbing – All Buildings ☐ Fire Protection ☐ Complex Buildings ☐ On-site Sewage Systems Description of designer's work D. Declaration of Designer _____ 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:

NOTE:

Date

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.

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.

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.

Signature of Designer



The Town of Tecumseh 917 Lesperance Rd. Tecumseh, ON N8N 1W9

Energy Efficiency Design Summary

(Part 9 Residential)

This form to be completed & signed by the person who reviews and takes responsibility for the energy efficiency design of the project Information on completing this form is contained on the reverse

Information on completing this form is contained on the reverse								
For use by Principal Authority								
Application No:			Model/Certification Number					
A. Project Information								
Building number, street name					Unit number	Lot/Con		
Municipality		Postal	code	Reg. Plan number / other description				
B. Compliance Option								
☐ SB-12 Prescriptive [SB-12	2 - 2.1.1.]		Table:	Package:				
☐ SB-12 Performance* [SB		<u>]</u>	* Attach ene	rgy performance calcula	ations using an ap	proved software		
☐ Energy Star®* [SB-12 - 2.1	.3.]		* Attach BOI	of form. House must be	labeled on comple	etion by Energy Star		
☐ EnerGuide 80® *			* House mus	st be evaluated by NRC	an advisor and m	eet a rating of 80		
C. Project Design Condi	tions							
Climatic Zone (SB-1):			ent Efficiency	Space Heating Fuel Se	ource			
□ Zone 1 (< 5000 degree days)	□ ≥ 90%	-			□ Propane	□ Solid Fuel		
□ Zone 2 (≥ 5000 degree days)		s < 90% A	FUE		□ Electric	□ Earth Energy		
Windows+Skylights+Glass Doo Gross Wall Area = m ²				Other Building Condit	ions ⊐ Walkout Basemer	t □ Log/Post&Beam		
Gross Window+ Area = m ²	% V	Vindows+	·%		ii 🗆 Log/Fosi&beaiii			
D. Building Specification	าร			a lot /tooks ofdas	□ Slab-on-ground			
Building Component		RSI / I	R values	Building Comp	onent	Efficiency Ratings		
Thermal Insulation				Windows & Doors ¹				
Ceiling with Attic Space				Windows/Sliding Glass	Doors			
Ceiling without Attic Space		5		Skylights				
Exposed Floor				Mechanicals				
Walls Above Grade				Space Heating Equip. ²				
Basement Walls			HRV Efficiency (%)					
Slab (all >600mm below grade)			DHW Heater (EF)					
Slab (edge only ≤600mm below grade)			NOTES					
Slab (all ≤600mm below grade, or he			 Provide U-Value in W/m2.K, or ER rating Provide AFUE or indicate if condensing type combined system used 					
E. Performance Design Verification [complete applicable sections if SB-12 Performance, Energy Star or EnerGuide80 options used]								
SB-12 Performance: The annual energy consumption using Subsection 2.1.1. SB-12 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 leakage of air changes per hour @50Pa.								
Energy Star. BOP form attached. The house will be labeled on completion by:								
Energy Star and EnerGuide80: Evaluator/Advisor/Rater Name: Evaluator/Advisor/Rater Licence #:								
F. Declaration [by the person who reviews and takes responsibility for the energy efficiency design] I certify that I have reviewed the design documents submitted with the permit application, that the information contained on this form is consistent with the								
I certify that I have reviewed the design	n docume	nts submitte	ed with the permi	t application, that the informa	tion contained on this t	form is consistent with the		

RESIDENTIAL MECHANICAL VENTILATION DESIGN SUMMARY

Location of Installation		Total Ventilation Capacity Section 9.32.3.3.(1)						
Lot#		Basement & M	aster Bedroom	-	@ 10 L/s		_L/s	
Plan#		Other Bedroon	Bedrooms		@ 5 L/s		_L/s	
Ward		Bathrooms & Kitchen		_	@ 5 L/s		_L/s	
Roll#		Other Rooms		-	@ 5 L/s		_ L/s	
Addre	rss	Total Volume	of Air		Total		_L/s	
Permi	t#	0.3 Air Exchange/Hr						
	Builder	Pr	incipal Vent	tilation Ca	pacity Section	on 9.32.3.4.(1)	
Name		Master Bedroo	m		@ 15 L/s	_L/s		
Addre	Address		ns	-	@ 7.5 L/s		_L/s	
City	City			,	Γotal		_L/s	
P.C.								
Tel.#			Princ	ipal Exha	ıst Fan Cap	acity		
Fax #		Model		Loc	cation	T		
	Installing Contractor		L/s		Sones		HVI	
Name		Make-up Air S	ize					
Addre	rss		Н	eat Recove	ery Ventilato	r		
City		Model						
P.C.			L/s High	h	_	L/s Hi	gh	
Tel.#		% Sensible Efficiency @ -25°C HVI						
Fax #								
Combustion Appliances 9.32.3.1.(1)		Supplemental Ventilation Capacity						
	Combustion Appliances 9.32.3.1.(1)		Supple	mental Ve	ntilation Ca	pacity		
a)	Combustion Appliances 9.32.3.1.(1) Direct vent (sealed combustion) only.	Total Ventilation		mental Ve	ntilation Ca	pacity	_ L/s	
a) b)					ntilation Ca	pacity	_ L/s _ L/s	
	☐ Direct vent (sealed combustion) only.	Less Principal	on Capacity	pacity		pacity		
b)	☐ Direct vent (sealed combustion) only. ☐ Positive venting induced draft (except fireplaces).	Less Principal	on Capacity Ventilation Cap lemental Ventil	pacity ation Capacit			_ L/s	
b) c)	 □ Direct vent (sealed combustion) only. □ Positive venting induced draft (except fireplaces). □ Natural draft, B – vent or induced draft fireplace. 	Less Principal	on Capacity Ventilation Cap lemental Ventil	pacity ation Capacit	y		_ L/s	
b) c) d)	 □ Direct vent (sealed combustion) only. □ Positive venting induced draft (except fireplaces). □ Natural draft, B – vent or induced draft fireplace. □ Solid fuel (including fireplaces). 	Less Principal Required Supp	on Capacity Ventilation Cap lemental Ventil	pacity ation Capacity mental Fa	y ns Section 9.	.32.3.5	_ L/s _ L/s	
b) c) d) e)	 □ Direct vent (sealed combustion) only. □ Positive venting induced draft (except fireplaces). □ Natural draft, B – vent or induced draft fireplace. □ Solid fuel (including fireplaces). □ No combustion appliances. 	Less Principal Required Supp	on Capacity Ventilation Cap lemental Ventil	pacity ation Capacity mental Fa	y ns Section 9.	.32.3.5	_ L/s _ L/s	
b) c) d) e)	 □ Direct vent (sealed combustion) only. □ Positive venting induced draft (except fireplaces). □ Natural draft, B – vent or induced draft fireplace. □ Solid fuel (including fireplaces). □ No combustion appliances. Heating System	Less Principal Required Supp	on Capacity Ventilation Cap lemental Ventil	pacity ation Capacity mental Fa	y ns Section 9.	.32.3.5	_ L/s _ L/s	
b) c) d) e)	□ Direct vent (sealed combustion) only. □ Positive venting induced draft (except fireplaces). □ Natural draft, B – vent or induced draft fireplace. □ Solid fuel (including fireplaces). □ No combustion appliances. ■ Heating System Orced Air □ Non Forced Air	Less Principal Required Supp	on Capacity Ventilation Cap lemental Ventil	pacity ation Capacity mental Fa	y ns Section 9.	.32.3.5	_ L/s _ L/s	
b) c) d) e)	□ Direct vent (sealed combustion) only. □ Positive venting induced draft (except fireplaces). □ Natural draft, B – vent or induced draft fireplace. □ Solid fuel (including fireplaces). □ No combustion appliances. Heating System orced Air □ Non Forced Air □ Electric Space Heat	Less Principal Required Supp	on Capacity Ventilation Cap lemental Ventil	pacity ation Capacity mental Fa	y ns Section 9.	.32.3.5	_ L/s _ L/s	
b) c) d) e) Fc	☐ Direct vent (sealed combustion) only. ☐ Positive venting induced draft (except fireplaces). ☐ Natural draft, B – vent or induced draft fireplace. ☐ Solid fuel (including fireplaces). ☐ No combustion appliances. ☐ Heating System ☐ Non Forced Air ☐ Electric Space Heat ☐ House Type Section 9.32.3.1 (2)	Less Principal Required Supp	on Capacity Ventilation Cap lemental Ventil	pacity ation Capacity mental Fa	y ns Section 9.	.32.3.5	_ L/s _ L/s	
b) c) d) e) Fc	☐ Direct vent (sealed combustion) only. ☐ Positive venting induced draft (except fireplaces). ☐ Natural draft, B – vent or induced draft fireplace. ☐ Solid fuel (including fireplaces). ☐ No combustion appliances. Heating System orced Air ☐ Non Forced Air ☐ Electric Space Heat House Type Section 9.32.3.1 (2) Type a) or b) appliances only, no solid fuel.	Less Principal Required Supp	on Capacity Ventilation Cap lemental Ventil	pacity ation Capacity mental Fa	y ns Section 9.	.32.3.5	_ L/s _ L/s	
b) c) d) e) Fc	□ Direct vent (sealed combustion) only. □ Positive venting induced draft (except fireplaces). □ Natural draft, B – vent or induced draft fireplace. □ Solid fuel (including fireplaces). □ No combustion appliances. Heating System orced Air □ Non Forced Air □ Electric Space Heat House Type Section 9.32.3.1 (2) Type a) or b) appliances only, no solid fuel. I Type I except with solid fuel (including fireplace).	Less Principal Required Supp	on Capacity Ventilation Cap lemental Ventil	pacity ation Capacity mental Fa	y ns Section 9.	.32.3.5	_ L/s _ L/s	
b) c) d) e)	☐ Direct vent (sealed combustion) only. ☐ Positive venting induced draft (except fireplaces). ☐ Natural draft, B – vent or induced draft fireplace. ☐ Solid fuel (including fireplaces). ☐ No combustion appliances. Heating System orced Air ☐ Non Forced Air ☐ Electric Space Heat House Type Section 9.32.3.1 (2) Type a) or b) appliances only, no solid fuel. Type I except with solid fuel (including fireplace). If Any Type c) appliance.	Less Principal Required Supp	on Capacity Ventilation Cap lemental Ventil Supple tion	mental Fa Model	y ns Section 9.	.32.3.5	_ L/s _ L/s	
b) c) d) e)	□ Direct vent (sealed combustion) only. □ Positive venting induced draft (except fireplaces). □ Natural draft, B – vent or induced draft fireplace. □ Solid fuel (including fireplaces). □ No combustion appliances. Heating System orced Air □ Non Forced Air □ Electric Space Heat House Type Section 9.32.3.1 (2) Type a) or b) appliances only, no solid fuel. □ Type I except with solid fuel (including fireplace). □ Any Type c) appliance. V Type I or II with electric space heat.	Less Principal Required Supp Loca I hereby cert	on Capacity Ventilation Cap lemental Ventil Supple tion	mental Fa Model Designer C	ns Section 9. L/s L/s Certification System has be	.32.3.5 Sones	L/s L/s HVI	
b) c) d) e)	□ Direct vent (sealed combustion) only. □ Positive venting induced draft (except fireplaces). □ Natural draft, B – vent or induced draft fireplace. □ Solid fuel (including fireplaces). □ No combustion appliances. Heating System orced Air □ Non Forced Air □ Electric Space Heat House Type Section 9.32.3.1 (2) Type a) or b) appliances only, no solid fuel. □ Type I except with solid fuel (including fireplace). □ Any Type c) appliance. V Type I or II with electric space heat. Other: Type I, II or IV no forced air.	Less Principal Required Supp Loca I hereby cert	on Capacity Ventilation Cap lemental Ventil Supple tion	mental Fa Model Designer C	ns Section 9. L/s L/s Certification System has be	.32.3.5 Sones	L/s L/s HVI	
b) c) d) e) Fc	Direct vent (sealed combustion) only. Positive venting induced draft (except fireplaces). Natural draft, B – vent or induced draft fireplace. Solid fuel (including fireplaces). No combustion appliances. Heating System Orced Air Electric Space Heat House Type Section 9.32.3.1 (2) Type a) or b) appliances only, no solid fuel. Type I except with solid fuel (including fireplace). Type I or II with electric space heat. Other: Type I, II or IV no forced air. System Design Option	Less Principal Required Supp Loca I hereby cert	on Capacity Ventilation Cap lemental Ventil Supple tion	mental Fa Model Designer C	ns Section 9. L/s L/s Certification System has be	.32.3.5 Sones	L/s L/s HVI	
b) c) d) e) Fo	□ Direct vent (sealed combustion) only. □ Positive venting induced draft (except fireplaces). □ Natural draft, B – vent or induced draft fireplace. □ Solid fuel (including fireplaces). □ No combustion appliances. Heating System orced Air □ Non Forced Air □ Electric Space Heat House Type Section 9.32.3.1 (2) Type a) or b) appliances only, no solid fuel. □ Type I except with solid fuel (including fireplace). □ Any Type c) appliance. □ Type I or II with electric space heat. □ Other: Type I, II or IV no forced air. System Design Option Exhaust Only/Forced Air System/Make-up Air.	Less Principal Required Supp Loca I hereby cert accordance v	on Capacity Ventilation Cap lemental Ventil Supple tion	mental Fa Model Designer C	ns Section 9. L/s L/s Certification System has be	.32.3.5 Sones	L/s L/s HVI	
b) c) d) e)	Direct vent (sealed combustion) only. Positive venting induced draft (except fireplaces). Natural draft, B – vent or induced draft fireplace. Solid fuel (including fireplaces). Heating System Therefore System Therefore Section 9.32.3.1 (2) Type a) or b) appliances only, no solid fuel. Type I except with solid fuel (including fireplace). Any Type c) appliance. Type I or II with electric space heat. Type I, II or IV no forced air. System Design Option Exhaust Only/Forced Air System/Make-up Air. HRV with Exhaust Ducts/Forced Air System.	Less Principal Required Supp Loca I hereby cert accordance v Name	on Capacity Ventilation Cap lemental Ventil Supple tion	mental Fa Model Designer C	ns Section 9. L/s L/s Certification System has be	.32.3.5 Sones	L/s L/s HVI	

AUTHORIZATION

This form is to be used for permit applications submitted by other than the owner

Address of Subject Land:
I / We the undersigned being the registered owner of the above lands, hereby authorize:
(Name of Applicant)
to make application for a permit for the purpose of constructing, altering, demolishing or changing the use of :
(Description of Project/Work)
Date:
Owner's Signature:
Owner's Signature:

Guide to the Energy Efficiency Design Summary Form

The *Energy Efficiency Design Summary* form summarizes the compliance path used by a house designer to comply with energy efficiency requirements of the Ontario Building Code. This form is completed by the person responsible for the energy efficiency design of the project, and must be submitted with the building permit application. The information on this form MUST reflect the drawings and specifications being submitted, or the building permit will be refused. 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 at www.mah.gov.on.ca, or the municipal building department.

Beginning January 1, 2012, a house designer must use one of four energy efficiency compliance options in the building code:

- 1. Comply with the SB-12 Prescriptive design tables,
- 2. Use the SB-12 Performance compliance method, and model the design against the prescriptive standards,
- 3. Design to Energy Star standards, or
- 4. Evaluate the design according to EnerGuide technical procedures and achieve a rating of 80 or more.

COMPLETING THE FORM

B. Compliance Options

Indicate the compliance option being used.

- <u>SB-12 Prescriptive</u> requires that the building conforms to a package of thermal insulation, window and mechanical system efficiency requirements set out in Subsection 2.1.1. of SB-12. Energy efficiency design modeling and testing of the building is not required under this option.
- <u>SB-12 Performance</u> refers to the alternative method of compliance set out in Subsection 2.1.2. of SB-12.
 Using this approach the designer must use recognized energy simulation software (HOT2000 V9.34c1.2 or newer), and submit documents which show that the annual energy use of the building is equal to a prescriptive package.
- <u>Energy Star</u> houses must be designed to *Energy Star* requirements and be labelled on completion by Enerquality or other agency. The *Energy Star* BOP form must be submitted with the permit documents.
- <u>EnerGuide80</u> houses are validated by NRCan authorized energy advisors and must achieve a rating of 80 or more when evaluated in accordance with EnerGuide administrative and technical procedures.

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 and 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 <u>SB-12 Prescriptive</u> option may not be used. The total area is the sum of all the structural rough openings. Some exceptions apply. Refer to 2.1.1.1. 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 <u>SB-12 Prescriptive</u> compliance package table applies. Other Building Conditions: These construction conditions affect <u>SB-12 Prescriptive</u> compliance requirements.

D. Building Specifications

Thermal Insulation: Indicate the RSI or R-value being proposed where they apply to the house design. Under the <u>SB-12 Prescriptive</u> option, RSI 3.52 wall insulation is permitted in certain conditions where other design elements meet higher standards. Refer to SB-12 for further details.

E. Performance Design Summary

This section is not required to be completed if the SB-12 Prescriptive option is being used.

AIRTIGHTNESS REQUIREMENTS FOR 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. A blower door test to verify the air tightness of the house must be conducted during construction if the *NRCan EnerGuide80* option is used, or if the *SB-12 Performance* or *Energy Star* options are used and an air tightness of less than 2.5 ACH @ 50 Pa in the case of detached houses, or 3.0 ACH @ 50 Pa in the case of attached houses is necessary to meet the required energy efficiency standard.

ENERGY EFFICIENCY LABELING FOR NEW HOUSES

Energy Star and *EnerGuide* issue labels for new homes constructed under their energy efficiency programs. The building code does not regulate new home labelling.



WATER DIVISION WATER METER & SERVICE PERMIT

The undersigned hereby applies for a **Water Meter & Service Permit** according to the information below.

Permit No.

APPLICANT:					
Name:					
Address:	Telephone:				
City:	Postal Code:				
INSTALLER / CONTRACTOR:					
Company Name:					
Individual Contact:					
Address:	Telephone:				
City:	Postal Code:				
SERVICE REQUIREMENTS:					
☐ Inspection ONLY ¾" ☐ 1" ☐ Other	Temporary Construction Charges				
☐ Tap & Inspection ONLY 1" ☐ Other	Up to 2" □ Over 2" □ \$				
Lot Line to Building TEC Install Building New Service Copper Renewal Custom Install P.V.C. Size 3/4" Other: CIVIC ADDRESS: DECLARATION I am the applicant who is the owner or the authorized agent of the own that I have full knowledge of all the particulars contained in this application and solemnly destated to the best of my knowledge and belief.					
Date: Signature:					
FOR OFFICE USE ONLY					
AS CONSTRUCTED Information:	FEES:				
Approved by:	All fees are in accordance with the Town's current fees and charges by-law.				
Date: Comments / Deficiencies:	Amount: Date Paid:				