



CORPORATION OF THE CITY OF VERNON
 3400 – 30TH Street, Vernon BC., V1T 5E6
 Phone: 250-545-1361 Fax: 250-549-1535
 Email: buildingcounter@vernon.ca
 Website: www.vernon.ca

BUILDING PERMIT APPLICATION

APPLICATION FOR NON – COMPLEX BUILDINGS

NON-COMPLEX BUILDING AS DEFINED BY BYLAW NO. 4900			
A building of three storeys or less in building height, having a building area not exceeding 600 square meters and used for major occupancies classified as: residential occupancies & personal services occupancies, mercantile occupancies, medium & low hazard industrial occupancies: and farm buildings.			
PLEASE PRINT (TO BE FILLED OUT COMPLETELY BY APPLICANT)			
DATE OF APPLICATION:		'My City' Access Code:	
PROJECT ADDRESS:			
LEGAL DESCRIPTION: Lot#		Plan#	
Scope of Work:			
Construction Cost: \$		Floor Area: sq.ft.	
OWNER:	Name:		Phone:
	Address:		Fax:
	Postal Code:	Email:	Cell:
OWNER'S AGENT:	Name:		Phone:
	Address:		Fax:
	Postal Code:	Email:	Cell:
CONTRACTOR:	Name:		Phone:
	Address:		Fax:
	Postal Code:	Email:	Cell:
	Business Licence #:		Cell:

ENSURE ALL THE FOLLOWING ARE INCLUDED (AS APPLICABLE)

APPLICATION CHECKLIST								
Schedule "2" Undertaking	(Owners	YES	NO	N/A	Existing Damage to Municipal Works Form Completed	YES	NO	N/A
Schedule "3" (Appointment of Agent)		YES	NO	N/A	Development Servicing Bylaw #3843 Requirements (see guide)	YES	NO	N/A
Title Search (<30 Days old)		YES	NO	N/A	Sewage Disposal permit	YES	NO	N/A
2 Sets of Construction Plans Including Truss/Joist specs		YES	NO	N/A	City and/or Highway Access Permit	YES	NO	N/A
SITE PLAN		YES	NO	N/A	Ministry of Health Approval	YES	NO	N/A
HPO registered		YES	NO	N/A	Site Servicing	YES	NO	N/A
Schedule B (ORIGINALS)		YES	NO	N/A	'Late Comer Bylaw'	YES	NO	N/A
Designated Heritage Building		YES	NO	N/A	Ministry of LWAP Approval	YES	NO	N/A
Fire and Interface Requirements		YES	NO	N/A	Retaining or Stacked Rock Walls exceeding 1.2m. Height.	YES	NO	N/A

Applicant Name: _____

Applicant Signature: _____

(Please Print Clearly)

For Office Use	For Office Use
	ROLL NO:
	BUILDING & PLUMBING PERMIT NO:



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SCHEDULE "2"
OWNERS UNDERTAKING
(BYLAW # 4900)

PLEASE PRINT CLEARLY

PROPERTY ADDRESS:
LEGAL DESCRIPTION:

OWNER	Name:	Phone:
	Address:	Fax:
	Postal Code:	Email:

This undertaking is given by the undersigned, as the owner of the property described above, with the intention that it be binding on the owner and that the Corporation of the City of Vernon will rely on same.

I confirm that I have applied for a building permit pursuant to the City of Vernon Building/Plumbing Bylaw No.4900, and that I have carefully reviewed and fully understand all of the provisions of the Bylaw and in particular, understand, acknowledge and accept the provisions describing the purpose of the Bylaw, the conditions under which permits are issued, the disclaimer of warranty or representation and the limited extent of the scope of the Bylaw and inspections there under.

Without in any way limiting the foregoing, I acknowledge fully that it is my responsibility, whether or not any work to be performed pursuant to the permit applied for is done by me, a contractor or a registered professional, to ensure compliance with the Building Code and the Bylaw.

I am not in any way relying on the City or the Building Officials of the City, as defined under the Bylaw, to protect the owner or any other persons as set out in Section 1.2 of the Bylaw and I will not make any claim alleging any such responsibility or liability on the part of the City or its Building Officials.

DEVELOPMENT SERVICING BYLAW #3843

I have also reviewed the building permit application guide and acknowledge that as a condition of approval of a building permit the City of Vernon shall require that the Applicant provide works and services directly attributable to the development on the portion of highway immediately adjacent to the site to the centerline of the highway as per Section 7 – Servicing Requirements for Highways Abutting a Site Being Subdivided or Developed.

www.vernon.ca Development Servicing Bylaw # 3843 Section 7.

Date: _____

Owner's Signature _____



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SCHEDULE "3"
OWNERS UNDERTAKING
(BYLAW # 4900)

PLEASE PRINT CLEARLY

PROPERTY ADDRESS:
LEGAL DESCRIPTION:

OWNER	Name:	Phone:
	Address:	Fax:
	Postal Code:	E-mail:
OWNER'S AGENT	Name:	Phone:
	Address:	Fax:
	Postal Code:	E-mail:

I am the owner of the above referenced property and hereby authorize the above noted agent to represent met in an application for the following:

PLEASE CHECK WHERE APPLICABLE	
	Building Permit – Application #
	Demolition Permit – Application #
	Plumbing Permit – Application #
	Development Permit – Application #
	Development Variance Permit – Application #
	Sub Division Application – Application #
	Rezoning Application – Application #
	OCP Amendment Application – Application #
	Board of Variance Application – Application #
	Sign Permit – Application #

I hereby authorize the above noted agent to:

PLEASE CHECK WHERE APPLICABLE	
	View or Receive Copies of Correspondence and/or Permits
	View or Receive Copies of Permit Plans
	Receive a Building Permits the Owner of the Subject Property Prior to Transfer of Title

Date: _____

Owner's Signature: _____



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DAMAGE TO PUBLIC WORKS

NOTICE TO CONTRACTORS / OWNERS

BUILDING PERMIT NUMBER:		
ADDRESS:	Lot:	Plan:
<p>Section 14.2 of Building Bylaw No. 4900 states every owner to whom a permit is issued shall be responsible for the cost of repair of any damage to municipal works that occurs in the course of work authorized by the permit. As part of the permit application the applicant must inspect and declare any existing damage to municipal works. This information can be in the form of drawings, digital images, or photographs.</p> <p>Upon completion of the work and prior to occupancy, the City will inspect the municipal works and assign value to damage resulting from the work. This cost must be paid before an occupancy permit will be issued and will be used at some time in the future to repair the damage.</p>		
DECLARED DAMAGE:		

I hereby acknowledge that I personally inspected the Municipal works immediately adjacent to the above noted property and have accurately stated the damage to Municipal works.

Dated in Vernon, BC this _____ day of _____, 20 ____.

 Signature of Owner or Authorized Agent

 Print Name

OFFICE USE ONLY:	
_____ sections of sidewalk damage X _____ meters X unit cost / meter \$ _____	= \$ _____
_____ sections of curb damage X _____ meters X unit cost / meter \$ _____	= \$ _____
Other damage _____	= \$ _____
TOTAL:	\$ _____



Interior Health

HEALTH PROTECTION

Less Risk – Better Health

Building Permit and Business Licence Referral Information

Interior Health's Public Health Department oversees the promotion of health, and the prevention of disease and injury. The Health Protection Division provides services and initiatives which include supporting the regulatory and health promotion activities of Environmental Health Officers, Licensing Officers, Tobacco Enforcement Officers, Drinking Water Officers and Public Health Engineers. The Health Protection Division is responsible for enforcing legislation concerning the operation of:

- Food Premises (includes food service, food stores, food processing, prepackaged water/ice)
- Pools, Hot tubs and Spray Parks (excluding those for only a single family dwelling)
- Adult and Child Care Facilities
- Personal Service Establishments (body piercing, electrolysis, tanning & hair salons and tattoo parlours)
- Drinking Water Supply Systems (i.e. onsite water systems other than a single family dwelling)
- Tobacco Sales Facilities
- Onsite Sewerage Disposal Systems and Land Development

Please check the appropriate box(es) to indicate which of the above facilities are included with your proposed submission. This will flag Health Protection's responsibility for approvals related to your application for a Building Permit or Business Licence.

For more information, please refer to the following website:

<http://www.interiorhealth.ca/Health+and+Safety/> (then follow the links)

To contact a Environmental Health Officer or Licensing Officer at the Vernon Health Centre, please refer to the footer below.

OFFICE USE

- With reference to all legislation, policies and guidelines concerning this proposal, **we have no objection** to this proposal
- With reference to all legislation, policies and guidelines concerning this proposal, **we do not recommend approval** for the issuance of a building permit and/or business licence

DATE: _____

Signature of Environmental Health Officer or Licensing Officer

INTERIOR HEALTH AUTHORITY - Health Protection
VERNON HEALTH CENTRE Web: www.interiorhealth.ca

1440 – 14th Avenue, Vernon, BC V1B 2T1
Phone: 250-549-5714 Fax: 250-549-6367



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BUILDING PERMIT APPLICATION

LIST OF TRADES AND SUB TRADES

Site Address: _____ Project Type: _____ Permit #: _____

	NAME	PHONE #	BUSINESS LICENCE #
SURVEY			
EXCAVATION / FILL			
CONCRETE			
FRAMING			
INSULATION			
PLUMBING			
HEATING			
ELECTRICAL			
DRYWALL			
ROOFING			
SIDING / STUCCO			
MASONRY			
GLASS			
PAINTING			
LANDSCAPING			
PAVING			
OTHER			

I hereby make application for a Building Permit for the above captioned construction, and declare that the above statement is true and correct.

I acknowledge that all contractors and subcontractors working on this project are required to hold a valid City of Vernon or inter-community (mobile) business licence, and that use of unlicensed contractors or sub trades may result in cancellation of inspections.

Signature: _____ Phone # _____ Date _____

Owner or agent