

Town of Innisfil

Community Development Standards Branch
2101 Innisfil Beach Road
Innisfil, Ontario
L9S 1A1
705-436-3710

Building Permit Requirements

Basement Finish & Interior Alterations

The following information is required at submission. Complete submissions can be processed within 10 business days. Please view the Accessory Dwelling Unit package for separate suite requirements.

Building Permit Application Package

l.	Completed building permit application consisting of:				
		"Schedule 1: Designer Information" "Owner's Authorization for Agent to Make an Application" if applicable On-site sewage system analysis, if applicable			
2.	On	e (1) copy (in .pdf format) of plans and specifications drawn to scale which must include:			
		Existing floor plan			
		Overall dimensions and the dimensions of each room and space			
		Label the use of each room and space			
		Location and size of existing and proposed windows			
		Construction details for proposed construction including material, size and spacing (walls, doors and ceilings)			
		Location of plumbing fixtures, noting whether fixtures are existing or new			
		Location of smoke alarm(s) and carbon monoxide detector(s)			
		Show the location of an exhaust fan for the bathroom if the bathroom is not equipped with an openable window			
		A three-way wall switch located at the head and foot of the stairway, to control at least one lighting outlet with a fixture to light the stair, must be provided and designated on the plan indicating whether the switch is new or existing			
		If converting unheated space to heated, please provide Energy Efficiency Design Summary, HVAC design and calculations			

Fees & Issuance

1. A non-refundable application fee is due at the time of application submission. The application fee will be credited to your total amount due prior to permit issuance.

Applications are submitted through <u>Cloudpermit</u> - an online system to apply and track building permits, make payments, request inspections, and receive email updates on the building permit process.

2. The balance of fees are due before the permit can be issued. You will receive a notification with your total and payment instructions. Once all fees are paid, the permit will be issued in <u>Cloudpermit</u>.

Note: Fees are charged in accordance with the Town's Fees and Charges By-law, and are subject to change.

Schedule 1 Designer Information



Town of Innisfil Building Department 2101 Innisfil Beach Road, INNISFIL, ON L9S 1A1

Tel: 705-436-3710 1-888-436-3710 Fax: 705-436-7120

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 des	scription					
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 C]								
☐ Small Buildings ☐ Large Buildings ☐	□ HVAC – Ho □ Building Ser □ Detection, L □ Fire Protectio	rvices .ighting and Power						
D. Declaration of Designer								
I 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:								
 The information contained in this schedule is true to the best of my knowledge. I have submitted this application with the knowledge and consent of the firm. 								
Date		Signat	ture 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.
- 2. Schedule 1 is not required to be completed by a holder of a license, temporary license, or a certificate of authorization, 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's Authorization for Agent to Make an Application



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> Tel: 705-436-3710 1-888-436-3710 Fax: 705-436-7120

Date:	Permit No.:						
Proposed Work:							
Location:							
The undersigned, being the owner(s) of the above referenced property, authorizes							
Applicant Name	Address						
to apply for a permit for the above referenced project on my behalf. I understand that I shall be responsible for the terms of the conditions contained in the permit.							
(If come as is a sea INIDII) (IDII ALL)							
(If owner is an INDIVIDUAL)							
Owner's Name	Address						
Owner's Signature	Phone No. / E-Mail						
(If owner is a CORPORATION)							
Owner's Name	Address						
Name of Authorizing Officer	Phone No. / E-Mail						
Signature of Authorizing Officer (I have authority to bind the Corporation)							

