***MUNICIPALITY OF SHUNIAH***

*420 Leslie Ave*
*Thunder Bay, ON*
*P7A 1X8*
*Tel: (807) 683-4545  Fax: (807) 683-6982*

# MEMORANDUM

May 1, 2022

## Sheds up to 15 square metres in area, do not require a building permit

Interim Amendments to the 2012 Building code exempt sheds up to **15 square metres** in area from requiring a building permit, provided the shed:

- Is not more than one storey in building height
- Is not attached to a building or any other structure
- Is used only for storage purposes ancillary to a principal building on the lot, and
- Does not have plumbing.

As per Ontario Regulation 451/22

Contact the Building Official at (807) 620-3709 if you have questions.

Accessory Building Application

# 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 number: |

Application submitted to: Municipality of Shuniah
(Name of municipality, upper-tier municipality, board of health or conservation authority)

## A. Project information

| Building number, street name | | Unit number | Lot/con. |
|---|---|---|---|
| Municipality: Shuniah | Postal code | Plan number/other description | |
| Project value est. $ | | Area of work ($m^2$) | |

## B. Purpose of application

☐ New construction ☐ Addition to an existing building ☐ Alteration/repair ☐ Demolition ☐ Conditional Permit

| Proposed use of building | Current use of building |
|---|---|
| | |

Description of proposed work

## C. Applicant

Applicant is: ☐ Owner or ☐ Authorized agent of owner

| Last name | First name | Corporation or partnership | |
|---|---|---|---|
| Street address | | Unit number | Lot/con. |
| Municipality | Postal code / Province | E-mail | |
| Telephone number ( ) | Fax ( ) | Cell number ( ) | |

## D. Owner (if different from applicant)

| Last name | First name | Corporation or partnership | |
|---|---|---|---|
| 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 partnership (if applicable) | |
|---|---|---|---|
| Street address | | Unit number | Lot/con. |
| Municipality | Postal code | Province | E-mail |
| Telephone number ( ) | Fax ( ) | Cell number ( ) | |

## F. Tarion Warranty Corporation (Ontario New Home Warranty Program)

| | | |
|---|---|---|
| i. Is proposed construction for a new home as defined in the *Ontario New Home Warranties Plan Act*? If no, go to section G. | ☐ Yes | ☐ No |
| ii. Is registration required under the *Ontario New Home Warranties Plan Act*? | ☐ Yes | ☐ No |

iii. If yes to (ii) provide registration number(s): _____

## G. Required Schedules

i) Attach Schedule 1 for each individual who reviews and takes responsibility for design activities.

ii) Attach Schedule 2 where application is to construct on-site, install or repair a sewage system.

## H. Completeness and compliance with applicable law

| | | |
|---|---|---|
| i) This application meets all the requirements of clauses 1.3.1.3 (5) (a) to (d) of Division C of the Building Code (the application is made in the correct form and by the owner or authorized agent, all applicable fields have been completed on the application and required schedules, and all required schedules are submitted). | ☐ Yes | ☐ No |
| Payment has been made of all fees that are required, under the applicable by-law, resolution or regulation made under clause 7(1)(c) of the *Building Code Act, I992*, to be paid when the application is made. | ☐ Yes | ☐ No |
| ii) This application is accompanied by the plans and specifications prescribed by the applicable by-law, resolution or regulation made under clause 7(1)(b) of the *Building Code Act, 1992.* | ☐ Yes | ☐ 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 *Building Code Act, 1992* which enable the chief building official to determine whether the proposed building, construction or demolition will contravene any applicable law. | ☐ Yes | ☐ No |
| iv) The proposed building, construction or demolition will not contravene any applicable law. | ☐ Yes | ☐ No |

## I. Declaration of applicant

I _____ declare that:
(print name)

1. The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.
2. 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.

MUNICIPALITY OF
SHUNIAH

# DETACHED GARAGE/SHED

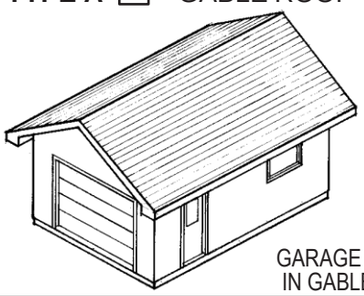
APPLICANT

ADDRESS

DATE

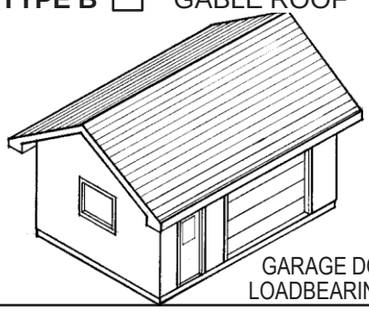
**DRIVEWAY:** Driveway location and design must be approved by the Operations Manager.

**TYPE A** ☐ GABLE ROOF



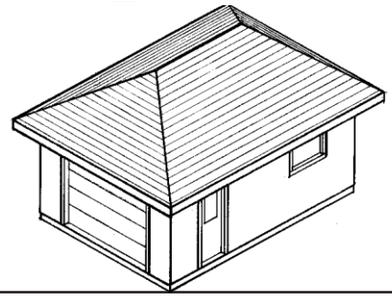
GARAGE DOOR IN GABLE END

**TYPE B** ☐ GABLE ROOF



GARAGE DOOR IN LOADBEARING WALL

**TYPE C** ☐ HIP ROOF



## Building Information (Dimensions)

Width _____ Length _____

Eaves*: Side _____ Ends _____

Wall Height _____ Total Ht _____

Side Yard: Left _____ Right _____

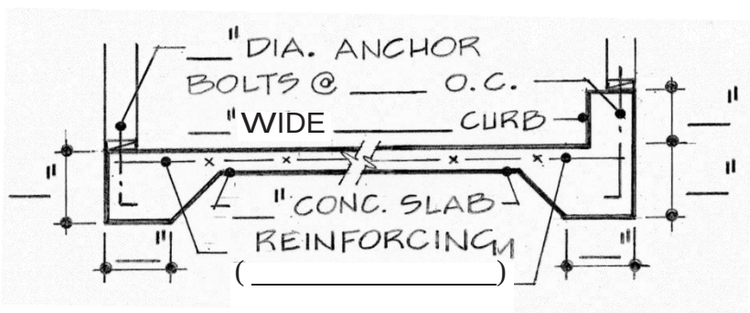
Rear Yard _____

Separation Distance To House _____

## Construction Information (Size, Material)

1. Walls 2" X ____" @ _____" Centres
2. a) Engineered Trusses @ _____" Centres
   or b) Rafters 2" X ____" @ _____" Centres
   Joists 2" X ____" @ _____" Centres
3. Roof Sheathing _____" Plwd _____" Chipboard
4. Roofing: Shingles _____ Roll _____ Metal _____
5. Wall Sheathing _____" Plwd _____" Chipboard
6. Exterior Finish _____

## Foundation Information




☐ **TYPE 1** ☐ **TYPE 2**

☐ **OTHER** (Detail required)

## Lintel Sizes

| | # | SIZE |
|---|---|---|
| Overhead Door: | ( __ ) - | 2" X ___" |
| Man Door: | ( 2 ) - | 2" X ___" |
| Window: | ( 2 ) - | 2" X ___" |

## CAUTION:

A separate building permit will be required if a **SOLID FUEL BURNING APPLIANCE** (e.g. woodstove) is used in the proposed building. Refer to our **"GUIDE TO RESIDENTIAL SOLID FUEL BURNING APPLIANCES."**

## GARAGE/SHED PLAN: Recommended Scale - One Square = 2'0"

*NOT TO BE USED FOR SITE PLAN DRAWING*

## Plan Information Required

Floor Plan Showing Dimensions

- Width And Length
- Opening Locations
  - Garage Door _____W_____ H
  - Man Door _____W_____ H
  - Windows (1) _____W_____ H
    (2) _____W_____ H
- Interior Partitioning
- Additional Information (See Below)

_____

_____

_____

## OFFICE USE ONLY:

- Building Area _____
- Zone

Reviewed By

- Zoning _____
- Plans _____

**APPROVED**

_____

_____

Application No. _____

Issue Date _____

A review of this project application information did not include a review of minimum separation dearances from overhead electrical distribution wires (conductors) and transformers or other matters for which specific information was not provided. The owner/ applicant is required to seek and obtain such other approvals as may be necessary. In all cases, the most restrictive condition applies. Where other restrictions cause any change to the location or construction of this project, such changes must be reviewed and approved by the Municipality prior to construction.

**B2411**

# 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 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]

| | | |
|---|---|---|
| ❑ House | ❑ HVAC – House | ❑ Building Structural |
| ❑ Small Buildings | ❑ Building Services | ❑ Plumbing – House |
| ❑ Large Buildings | ❑ Detection, Lighting and Power | ❑ Plumbing – All Buildings |
| ❑ Complex Buildings | ❑ Fire Protection | ❑ On-site Sewage Systems |

Description of designer's work

## 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:

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.

_____ _____

Date Signature of Designer

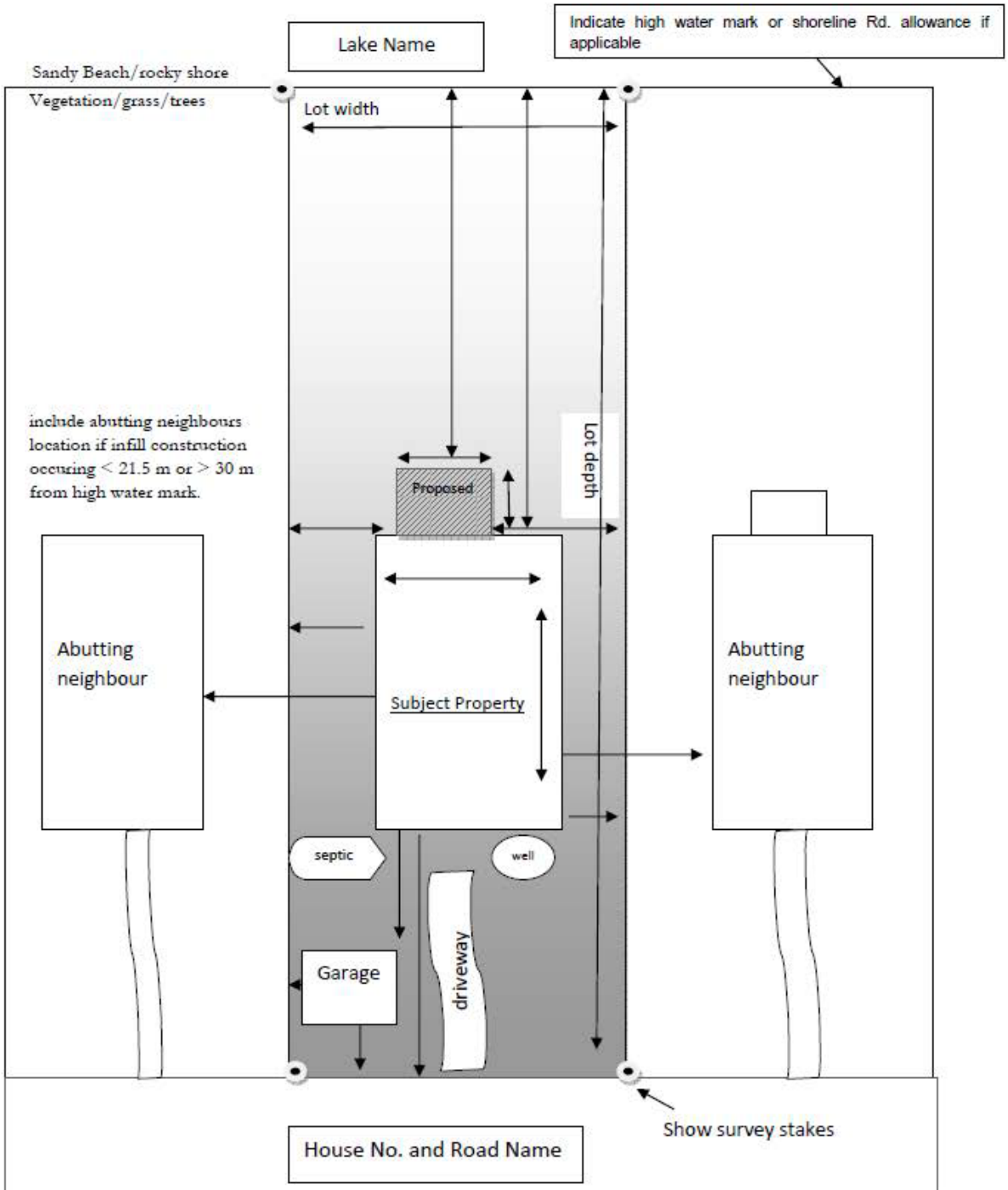
NOTE:

1. For the purposes of this form, "individual" means the "person" referred to in Clause 3.2.4.7(1) (c).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 practice, a limited license to practice, or a certificate of authorization, issued by the Association of Professional Engineers of Ontario.

| **For Use by Principal Authority** | **Appl'n No.** | **Permit No: (if different)** |
|---|---|---|
| | | |

Example Site Plan




Site Plan:

1. Indicate lot dimensions and address or legal description.
2. Indicate location and area of all structures on the property and label as "existing".
3. Indicate location and area of the proposed construction and label as "proposed".
4. Indicate the distance from each structure (existing and proposed) to each property line and each other structure.
5. Indicate septic and well location and type.
6. Measurements must be legible, please use metric (bracket imperial measurements if desired).
7. If waterfront property the water is the front yard and the road is the rear yard.
8. If not waterfront, road is the front yard.

For Infill, please include:

9. Abutting neighbours location if infill construction occurring.

B2416

# Agent Authorization Form

| A. Project information | | | |
|---|---|---|---|
| Building number, street name | | Unit number | Lot/con. |
| Municipality | Postal code | Plan number/other description | |

## B. Authorization of Property Owner

The undersigned, being the registered property owner of the above noted property, hereby authorizes _____, to apply for a building permit on my behalf.

☐ I request to be contacted, along with the applicant, regarding any changes or modifications to the application throughout the permit process. I confirm my contact information is included on the building permit application.

## C. Declaration of Property Owner

I, _____ declare that:
(print name)

1. The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.
2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

D ate: _____ Signature of Owner: _____

## D. Authorization of Building Owner (if different from property owner)

The undersigned, being the registered building owner on the above noted property, hereby authorizes _____, to apply for a building permit on my behalf.

☐ I request to be contacted, along with the applicant, regarding any changes or modifications to the application throughout the permit process. I confirm my contact information is:

Phone: _____ Email:

## E. Declaration of Building Owner (if different from property owner)

I, _____ declare that:
(print name)

1. The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.
2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

Date: _____ Signature of Owner: _____