**CAPITAL REGION SERVICE COMMISSION**
***COMMISSION DE SERVICES RÉGIONAUX DE LA CAPITALE***

# Building/ Development Permit Application

## JOB SITE DETAILS:

| | PARISH | COUNTY |
|---|---|---|
| PID: | Subdivision Name: | |
| Lot #: | Address: | Municipality: |

## TYPE OF CONSTRUCTION:

| | | | |
|---|---|---|---|
| ☐ House<br>☐ House with an attached garage | ☐ Modular | ☐ Addition to existing structure | ☐ Alteration/Repair |
| ☐ Locate mini-home/mobile | ☐ Detached garage | ☐ Shed/Baby barn | ☐ Demolition |
| ☐ Other (Please describe): | | | |

## INTENDED USE:

| | | | | |
|---|---|---|---|---|
| ☐ Single Family Dwelling | ☐ Two Unit Dwelling | ☐ Personal | ☐ Commercial | ☐ Other: |

## STRUCTURE DETAILS:

| | |
|---|---|
| Total square footage of structure: | Number of storeys: ☐ 1 ☐ 1.5 ☐ 2 ☐ 3+ |
| Longest dimensions of structure: ft x ft | |

## CONSTRUCTION TIMELINE/COST:

| | | |
|---|---|---|
| Proposed start date: | Expected completion date: | **Estimated cost of construction:** |

## LEGAL PROPERTY OWNER/PERSON ACTING ON BEHALF OF PROPERTY OWNER:

| | | | |
|---|---|---|---|
| Name: | | Company name: | |
| Address: | | | Home #: |
| Municipality: | Province: | Postal Code: | Cell #: |
| Email: | | | Office #: |

## CONSTRUCTOR: or ☐ *Same as Owner/Person acting on behalf of owner*

| | | | |
|---|---|---|---|
| Name: | | Company name: | |
| Address: | | | Home #: |
| Municipality: | Province: | Postal Code: | Cell #: |
| Email: | | | Office #: |

## SEPTIC SYSTEM REQUIREMENTS:

☐ **On-site Septic System Approval attached. NOTE: Building permits <u>will not</u> be issued until written notification that the septic system approval has been granted by the Department of Public Safety.**

I hereby apply for the permit(s) or approval(s), indicated above for the work described on plans, submissions, and forms herewith submitted. The application includes all relevant documentation necessary for the applied permit(s) or approval(s). I agree to comply with the plans, specifications, and further agree to comply with all relevant by-laws and conditions imposed. By submitting a complete permit application, the applicant grants permission to the CRSC staff to enter land, building, or premises at all reasonable times for the purposes of conducting inspections associated with the application.

I am applying for a building permit for the above detailed work which will comply with the National Building Code of Canada 2015, as well as the National Energy Code of Canada 2011 as required. I am aware of the requirements of the Building Code Administration Act (and its regulations) and my responsibilities thereunder. By signing I also acknowledge that I have been advised of the required inspections.

If this building is intended to house livestock or store manure, please attach a copy of your license to operate under the Livestock Operations Act.

Any proposed usage or construction must comply with all other applicable Acts and Regulations. **INITIAL:** _____

| | |
|---|---|
| Signature:<br>**X** | Date: |

## CONSTRUCTION COMPONENTS

☐ Plans Attached
☐ Engineered Plans Attached

### 1) FOUNDATION

| Foundation Type: | Design: | Footing Size: | Wall Thickness |
|---|---|---|---|
| ☐ Conventional Concrete Wall | ☐ 4' frost wall | _____ H x _____ W | ☐ 6" |
| ☐ ICF **(attach ICF INFORMATION FORM)** | ☐ 4' crawlspace | | ☐ 8" |
| ☐ Thickened edge slab-on-grade[1] | ☐ 8' basement | | ☐ Other: |
| | ☐ Other: | | |

[1]Aside from accessory buildings no greater than 55m$^2$/592 sq. ft., all thickened edge slab-on-grade foundations require an engineered design.

### 2) ABOVE-GROUND WALLS AND FLOORS

| **WALL SYSTEM:** | | | |
|---|---|---|---|
| **Exterior Wall System:** | **Wall Stud Size:** | **Stud Spacing o/c:** | **Wall Sheathing:** |
| ☐ Wood | ☐ 2" x 4" | ☐ 16" | ☐ 7/16" OSB |
| ☐ ICF **(attach ICF FORM)** | ☐ 2" x 6" | ☐ 19.2" | ☐ 3/4" Boards |
| ☐ Other: | ☐ 2" x 8" | ☐ 24" | ☐ Plywood |
| **Wall Stud Height:** | ☐ Other: | ☐ Other: | ☐ Other: |
| _____ | | | |

| **FLOOR SYSTEM:** | *** If Engineered Open Web Joists (OWJ) are used, a floor layout and design specification sheet is required to be submitted prior to permit issuance.** | | | |
|---|---|---|---|---|
| **Floor Joists:** | **Joist Spacing o/c:** | **Strapping:** | **Subfloor:** | **Subfloor Thickness:** |
| ☐ Engineered OWJ | ☐ 12" | ☐ 1" x 3" | ☐ Plywood | ☐ 5/8" |
| ☐ 2" x 6" | ☐ 16" | ☐ 1" x 4" | ☐ OSB | ☐ 3/4" |
| ☐ 2" x 8" | ☐ 19.2" | ☐ Other: | ☐ Boards | ☐ Other: |
| ☐ 2" x 10" | ☐ 24" | | ☐ Other: | |
| ☐ Other: | ☐ Other: | | | |

### 3) ROOF SYSTEM

| **ROOF SYSTEM** | *** If engineered roof trusses are used, a truss layout and design specification package is required to be submitted prior to permit issuance.** | | | |
|---|---|---|---|---|
| **Roof System Type:** | **Rafter Size:** | **Rafter Spacing:** | **Roof Sheathing:** | **Sheathing Thickness:** |
| ☐ Engineered roof trusses | ☐ 2" x 4" | ☐ 12" | ☐ Plywood | ☐ 1/2" with H clips |
| ☐ Rafters | ☐ 2" x 6" | ☐ 16" | ☐ OSB | ☐ 5/8" |
| | ☐ 2" x 8" | ☐ 24" | ☐ Boards | ☐ 3/4" |
| | ☐ Other: | ☐ Other: | ☐ Other: | ☐ Other: |

### 4) INSULATION

| | Batt Insulation: | Sheet Foam: | Spray Foam: | Blown-in Insulation: | ICF: | R Value: |
|---|---|---|---|---|---|---|
| **Attic Insulation:** | ☐ | ☐ | ☐ | ☐ | | _____ |
| **Above-Ground Wall Insulation:** | ☐ | ☐ | ☐ | ☐ | ☐ | _____ |
| **Box Sill Insulation:** | ☐ | ☐ | ☐ | | ☐ | _____ |
| **Foundation Wall Insulation:** | ☐ | ☐ | ☐ | | ☐ | _____ |
| **Floor Slab Insulation:** | ☐ | ☐ | ☐ | | | _____ |

I hereby certify that the above information has been filled out to the best of my knowledge. INITIAL: _____

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## SITE PLAN DETAILS

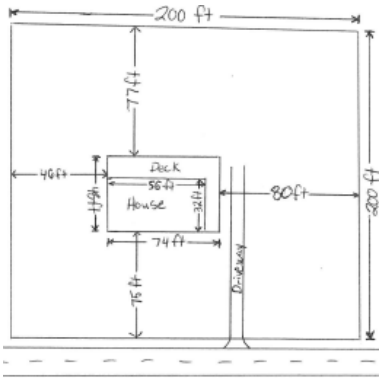
A site plan is required for each proposed structure. A site plan can be attached to this application by printing off the relevant land parcel from SNB (https://paol-efel.snb.ca/) and sketching the proposed structure with distances from each property line. On the site plan, the applicant shall also indicate where any of the following are:

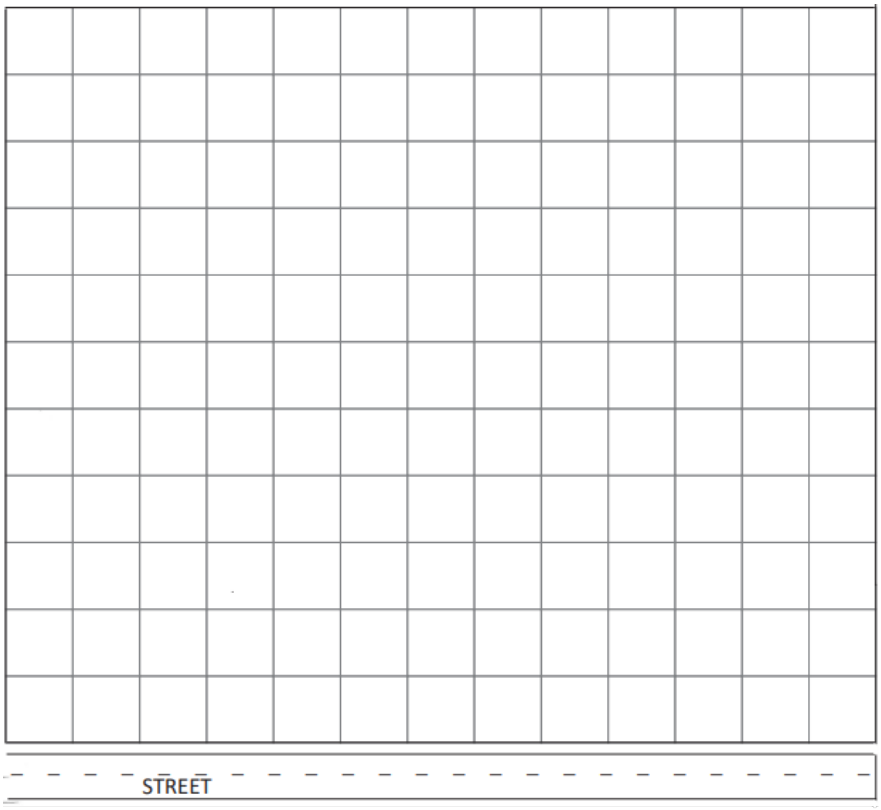
- Existing or proposed driveway
- Any other structures on the lot
- Distances from any wetlands or watercourses (if applicable)

**Site plan attached:** ☐ **Yes** ☐ **No** **If no, please draw a site plan below.**

Lot Dimensions: _____ x _____
Structure Dimensions: _____ x _____
Dimensions from:
Front line: _____
Back line: _____
Right side line: _____
Left side line: _____
Comments:
_____
_____
_____

Example:




| **OFFICE USE ONLY:** Admin Fee + (_____) = $_____ | ☐ DEBIT ☐ VISA ☐ M/C ☐ CASH ☐ CHEQUE #_____ | Received by: | Receipt # |
|---|---|---|---|

**DEVELOPMENT OFFICER REVIEW: (Name of Zone/Rural Plan/Basic Planning Statement)**

| Zoning ☐ NO ☐ YES | Zone/RP/BPS | |
|---|---|---|
| Permitted use ☐ NO ☐ YES | Comments | |
| ☐ Approved ☐ Denied *(see attached)* | Date reviewed: | Reviewed by: |

**BUILDING INSPECTOR REVIEW:**

| Reviewed/Issued by: | Date issued: | Permit #: |
|---|---|---|
| Plans review comments: | | |

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# ICF INFORMATION FORM

**PLANS/OPENING LAYOUTS ARE REQUIRED FOR BOTH ICF FOUNDATIONS AND ABOVE-GROUND WALLS PRIOR TO PERMIT ISSUANCE TO VERIFY WINDOW/DOOR OPENING LOCATIONS AND LINTEL SIZES REGARDLESS OF CONSTRUCTION METHOD.**

## ICF FOUNDATIONS

**ICF will be constructed as per:**

☐ Prescriptive Requirements of the 2015 National Building Code of Canada

If so, please fill out the following:

**ICF Manufacturer: _____**

| Wall Thickness: | Wall Height: | Backfill Height: | Vertical Rebar: | Vertical Rebar Spacing: | Horizontal Rebar: | Horizontal Rebar Spacing: |
|---|---|---|---|---|---|---|
| ☐ 6” | ☐ 4’ | ☐ < 5’3” | ☐ 10 M | ☐ 8” - 10” | ☐ 10 M | ☐ 16” |
| ☐ 8” | ☐ 8’ | ☐ < 6’6” | ☐ 15 M | ☐ 12” | ☐ 15 M | ☐ 18” |
| ☐ 10” | ☐ 9’ | ☐ < 8’6” | ☐ Other: | ☐ 16” | ☐ Other: | ☐ Other: |
| ☐ Other: | ☐ Other: | ☐ Other: | | ☐ Other: | | |

**OR**

☐ An engineered design stamped by a licensed professional engineer registered in the Province of New Brunswick (If so, a copy of the stamped design is required)

**OR**

☐ ICFMA manual (If so, a copy of the stamped design is required) *

*CRSC requires that all backfill soils are tested by a qualified professional firm to ensure that soils meet the parameters of the ICFMA manual. In addition, CRSC requires a stamped engineered design provided by a licensed professional engineer registered in the Province of New Brunswick to confirm that the specifications of the ICFMA manual are sufficient for each proposed structure’s design (uniformly distributed loads, unfactored loads, girder truss point loads, etc.).

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## ABOVE-GROUND ICF WALLS (IF APPLICABLE)

**Above-ground ICF walls will be constructed as per**:

☐ Prescriptive Requirements of the 2015 National Building Code of Canada

If so, please fill out the following:

| Wall Thickness: | Wall Height(s): | Floor Ledger Connections |
|---|---|---|
| ☐ 6” | ☐ 8’ | ☐ 1/2” anchor bolts |
| ☐ 8” | ☐ 9’ | ☐ 5/8” anchor bolts |
| ☐ 10” | ☐ 10’ | ☐ Pre-engineered connectors (i.e. Simpson brackets) |
| ☐ Other: | ☐ Other: | |

☐ Horizontal rebar size and spacing shall conform to 9.20.17.2.(1)(a-b): 10M bar at not more than 24” o/c.

☐ Vertical rebar size and spacing shall conform to 9.20.17.2.(2)(a-b): 10M bar at not more than 16” o/c.

☐ Lintel sizes for openings shall conform to ICF Span Tables found in 2015 National Building Code of Canada.

**OR**

☐ An engineered design stamped by a licensed professional engineer registered in the Province of New Brunswick (If so, a copy of the stamped design is required)

**OR**

☐ ICFMA manual (If so, a copy of the stamped design is required) *

*CRSC requires that all backfill soils are tested by a qualified professional firm to ensure that soils meet the parameters of the ICFMA manual. In addition, CRSC requires a stamped engineered design provided by a licensed professional engineer registered in the Province of New Brunswick to confirm that the specifications of the ICFMA manual are sufficient for each proposed structure’s design (uniformly distributed loads, unfactored loads, girder truss point loads, etc.).

I hereby certify that the above information has been filled out to the best of my knowledge. INITIAL: _____