1061 Marine Drive PO Box 130 Port Alice, BC V0N2N0 Phone: 250-284-3391 Fax: 250-284-3416 Email: info@portalice.ca

VILLAGE OF PORT ALICE APPLICATION FOR BUILDING OR PLUMBING PERMIT TO ERECT, ALTER, ADD, MOVE DEMOLISH A BUILDING



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Da	Date of Application:	Roll/Folio No.				
1.	1. Registered Owner(s)					
2.	2. Legal Description Lot Block	Plan	Zoning			
3.	3. Civic Address					
	Mailing Address (Owners)					
	Telephone numbers Home	Work	_ Cell			
4.	4. Other Applicant: Contractor or Agent (Name)					
	Mailing Address					
	Telephone numbers Home					
	Is Contractor a Certified Tradesman? Yes	No If No Provide de	etailed schematic.			
5.	. Designer/ArchitectTelephone number					
6.	6. Use of Building Buil	Iding Area	Number of Stories			
7.	7. Class of Work New Addition	Alteration Move	Demolish			
	Number of Dwelling Units Created					
8.	8. Describe Work					
9.	9. Actual Building Setbacks: Front Left S	Side Right Side	Rear			
	Actual Coverage Ratio % Parki	ng spaces required				
10.	10. Mobile Home Certification No. CSA.Z240					
11.	11. Is there a Building Scheme registered on the property? Yes No					
12.	12. Value of Construction \$					
13.	13. Water Meter: New installationYes	_No				
14.	 Water Connection: Beyond 20 metres distance f Standard 18mm (3/4") and within 20 metres distan Above Standard of 18mm (3/4")Yes 	ce from property line				
15.	15. Sewer Connection:YesNo Standard and within 20 metres distance from prop Above Standard of 100 mm (34") or more than 20					
10	16 I/wa the undersigned being the owner(a) of th	a property departhed apply	for a parmit to do the work datailed			

16. I/we, the undersigned, being the owner(s) of the property described, apply for a permit to do the work detailed in this application.

In consideration for this permit, I/we agree for myself/ourselves and my/our assigns to indemnify and keep harmless the Village of Port Alice and its officers against and from all claims, liabilities, judgements, costs S:\Forms\Planning\560-Application for building permit.rtf

and expenses which may accrue from granting this permit, or which may be brought or made against the Village of Port Alice, or its officers, in respect of any matter arising out of the works contemplated herein. This permit and/or the approval of plans or specifications supporting the application does not:

- a) Relieve the applicant, owner or occupant from conforming to all acts, bylaws and regulations;
- b) Relieve the owner's responsibility to search the title and check for restrictions against the property; and
- c) Make the municipality responsible for providing roads, lanes, water or any service for the property concerned, or impose upon the municipality or its employees any obligation to inspect or approve any construction carried on under this permit.
- 17. I confirm that I have relied only on the authorized person who filed documents pursuant to Section 8 of the Sewerage System Regulation for assurances regarding the adequacy of the sewerage system.

I understand, agree and will abide with the attached instructions regarding building permit applications and inspections.

Print Name

Signature of Owner(s)or Agent

Date

18. All contractors and sub-contractors require business licenses to operate within the Town limits.

OFFICE USE ONLY:

Maximum Height:				
Minimum Requirement Setbacks				
Front:	Rear:			
Left Side:	Right Side:			
Maximum ratio permitted	: %			
Class of Building (BCBC):				

WATER & SEWER CONNECTIONS				
Water Pipe Size				
Sewer Pipe Size				
	Yes	No	Cost	
Installation of New Water Meter				
Standard Water Connection				
Non Standard Water Connection				
Sewer Connection				
Non Standard Sewer Connection				

SPECIAL		NOT	
APPROVALS	REQD	REQD	FILE #
Development Permit			
Highways Dept			
Site Profile			
Variances			
Business License			
Damage Deposit			
HPO Registration No			
Application Approved by:			
Title:			
Date:			