



Alberni-Clayoquot Regional District BUILDING PERMIT APPLICATION

The following information is required at the time of application. If all applicable items listed below are not attached, the permit application will not be accepted for processing.

- One (1) completed Building Permit Application.
- Two (2) sets of plans that include foundation layout and details, floor plan and point loads, roof plan and point loads, cross sections, north/south/east/west elevation drawings, and brace wall panels (see: www.nationalcodes.ca/eng/presentations/lateral_loads/player.html).
- One (1) site plan showing the location of the proposed structure, as well as any existing structures, on the property. Note: any structure within 20 feet of a given setback will require a registered BC Land Survey.
- When applicable, we require proof that a sewage disposal system design has been filed with the required Health Authority, as required by the Health Act. This is not required if the property is serviced by a community sewage system or if you are building an accessory building with no sewage facilities.
- When applicable, we require one (1) notarized Homeowner Protection form. Forms and instructions can be obtained from the Homeowner Protection Office by calling 1-800-407-7757 or by email at hpo@hpo.bc.ca. The website is www.hpo.bc.ca .

**INCOMPLETE APPLICATIONS WILL BE
RETURNED TO THE APPLICANT.**



Alberni-Clayoquot Regional District BUILDING PERMIT APPLICATION

Property Owner's Contact Information:

Name:	
Mailing Address:	
City/Town:	
Province/State:	
Postal/Zip Code:	
Phone #:	
Alternate Phone #:	
Email Address:	

Agent/Contractor Contact Information (if applicable):

Name:	
Mailing Address:	
City/Town:	
Province/State:	
Postal/Zip Code:	
Phone #:	
Alternate Phone #:	
Email Address:	

Architect Contact Information (if applicable):

Name:	
Mailing Address:	
City/Town:	
Province/State:	
Postal/Zip Code:	
Phone #:	

Property Information:

Legal Description of Property:	
Civic Address of Property:	

Construction Information:

Estimated Total Value:			
Estimated Square Footage	Basement:	Main Floor:	2 nd Floor:



Alberni-Clayoquot Regional District BUILDING PERMIT APPLICATION

Construction Information (continued):

Type of Building (i.e., home, shop, storage shed, barn, etc.):			
Type of Construction (i.e., new, renovations, foundation, etc):			
Solid Fuel Burning Appliance (ie. woodstove, pellet stove, etc):		Yes <input type="checkbox"/>	No <input type="checkbox"/> # of units:
Dimensions of Building (Width x Depth x Height):			
Footing Dimensions (Width x Depth):		Depth of Foundation:	
Size of Girders under Main Floor:			
Size of Joists under	1 st Floor:	2 nd Floor:	3 rd Floor:

Building Materials:

Foundation Walls:	
Foundation Footings:	
Exterior Wall Finish:	
Interior Wall Finish:	
Interior Ceiling Finish:	
Roofing Material:	
Roof Type (i.e., flat, gable, peak, mansard, dome, etc.):	

Comments:	

Agreement, Release and Indemnity

I/we agree that the information in this application or gathered by the Regional District of Alberni-Clayoquot in connection with a building permit may be used by the Regional District of Alberni-Clayoquot for any purpose connected with the exercise of its powers or the performance of its duties including enforcement of Regional District of Alberni-Clayoquot bylaws. In consideration of the granting of a building permit, I/we agree to release and indemnify the Regional District of Alberni-Clayoquot, its board members, employees and agents from and against all liability, demands, claims of action, suits, judgements, losses, damages, costs, expenses of whatever kind which I/we or any other person, partnership or corporation or my/our respective heirs, successors, administrators or assignees may have or incur in consequence of or incidental to the granting of this permit or any inspection, failure to inspect, certification, approval, enforcement, or failure to enforce the Regional District of Alberni-Clayoquot Building Bylaw or the British Columbia Building Code and I/we agree that the Regional District of Alberni-Clayoquot owes me/us no duty of care in respect of these matters.

I have read the above agreement, release and indemnity and understand it.

Signature of Applicant

Date



Alberni-Clayoquot Regional District
Building Permit Application
RESPONSIBILITY OF OWNER

Neither the granting of a Building Permit, nor the approval of the relevant drawings and specifications, nor inspections made by the authority having jurisdiction, shall in any way relieve the registered property owner(s) from full responsibility for carrying out the work, or having the work carried out, in full accordance with the requirements of the British Columbia Building Code.

When the applicant is someone other than the registered owner(s) of the property on which the construction is to be undertaken, the Building Permit Application shall be accompanied by this statement, signed by the owner(s) as follows:

I/we, _____, the registered owner(s) of
Name(s) of Owner(s) – Please Print

_____ hereby
Civic or Legal Address of Property – Please Print

authorize _____ as
Name of Agent – Please Print

my/our agent to apply for a Permit to undertake construction on my property. As the registered owner(s), I/we understand and agree that I/we am/are responsible to ensure that the construction is carried out according to law and in compliance with the Building Bylaw and the Building Code.

Date

Signature(s) of Owner



Alberni-Clayoquot Regional District Building Permit Application **AGENCY CONTACT INFORMATION**

AGENCY	CONTACT NAME, TITLE	MAILING ADDRESS	EMAIL ADDRESS, WEBSITE	CONTACT #'S
BC Assessment Authority	Central Vancouver Island Office	300 – 125 Wallace Street Nanaimo, BC V9R 5B2	centralvanisl@bcassessment.ca www.bcasessment.ca	(250) 753-6621 office 1-800-977-2771 toll free
BC Safety Authority	Gas and Electrical Inspectors	Suite 40 1100 Princess Royal Ave Nanaimo, BC V9R 5R5	www.safetyauthority.ca	(250) 716-5200 office 1-866-566-7233 (New Westminster toll free)
Bamfield Water System	Les Butler	PO Box 76 Bamfield, BC V0R 1B0	lesbutler64@gmail.com	(250) 728-1260 or (250) 735-2148 cell
Cherry Creek Waterworks District	Michelle Price	5920 Cherry Creek Road Port Alberni, BC V9Y 7L6	ccww@shaw.ca	(250) 723-2214 office
Emcon Services Inc.	Oliver Watson, Superintendent - Area 2	1435 Springhill Road Parksville, BC V9P 2T2	owatson@emconservices.ca www.emconservices.org	(250) 248-6212 office
Emcon Services Inc.	Craig Peterson, Road Foreman Mike Mintz, Operations Mgr	4900 Maebelle Road Port Alberni, BC V9Y 7L6	No e-mail mmintz@emconservices.ca	(250) 724-6996
Ministry of Transportation and Infrastructure	Cindy Corner, Area Manager – Roads	3 rd Floor 2100 Labieux Road Nanaimo, BC V9T 6E9	cindy.L.corner@gov.bc.ca www.gov.bc.ca/tran	(250) 713-4404 cell (250) 751-3275 office 1-866-377-0177 toll free
North Island Laboratories	Water Testing	2755-B Moray Avenue Courtenay, BC V9N 8M9	nilabs@telus.net http://www.nilabs.com/	(250) 338-7786 office 1-877-533-3313 office
Service BC	Annameika Lee, Government Agent	4070 – 8 th Avenue Port Alberni, BC V9Y 4S4	Annameika.Lee@gov.bc.ca www.servicebc.gov.bc.ca	(250) 720-2044 office
Vancouver Island Health Authority	Glenn Gibson, Health Inspector	PO Box 1210 249 West Hirst Avenue Parksville, BC V9P 2H2	glenn.gibson@viha.ca www.viha.ca	(250) 947-8222 office

REGISTERED ONSITE WASTEWATER PRACTITIONERS

<http://owrp.asttbc.org/c/index.php>

Craig Bowerman	(250) 723-8775
Tim Cisaroski	(250) 724-6771
Rod Dyck (Bamfield)	(250) 728-1223
Denis Francoeur	(250) 724-1789
Tobin Laughlin	(250) 723-7066 or 1-877-898-7625 (toll free)
Brent Van Vliet	(250) 724-6762

The Registered Onsite Wastewater Practitioners listed above are local only. Visit the website for a full list of Planners, Installers, Maintenance Providers and Private Inspectors for Residential and Commercial projects in all areas.