

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, and north/south/east/west elevation drawings.
- 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

Applicant's Contact Information:		
Name:		
Mailing Address:		
City/Town:		
Province/State:		
Postal/Zip Code:		
Phone #:		
Alternate Phone #:		
Email Address:		

Alternate Phone #:		
Email Address:		
Agent/Contractor Co	ontact Information (if applicable):	
Name:		
Mailing Address:		
City/Town:		
Province/State:		
Postal/Zip Code:		
Phone #:		
Alternate Phone #:		
Email Address:		
Architect Contact Information (if applicable):		
Name:		

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 Va	lue:		
Estimated Square Footage	Basement:	Main Floor:	2 nd Floor:



Alberni-Clayoquot Regional District BUILDING PERMIT APPLICATION

Construction Informat	tion (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, et			Yes □	No □	# of units:
Dimensions of Building (Width x Depth x Height					
Footing Dimensions (Width x Depth):			Depth of F	oundation:	
Size of Girders under Mair	Floor:				
Size of Joists under	1 st Floor:	2 nd F	loor:		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:					
I/we agree that the informat a building permit may be use powers or the performance of consideration of the granting Clayoquot, its board membe judgements, losses, damages my/our respective heirs, such granting of this permit or any Regional District of Alberni-C District of Alberni-Clayoquot	Agreement, Releasion in this application or gathered by the Regional District of Albert of its duties including enforcement of a building permit, I/we agree the rs, employees and agents from an as, costs, expenses of whatever kind cessors, administrators or assigned inspection, failure to inspect, certally oquot Building Bylaw or the Britowes me/us no duty of care in resement, release and indemnity and united to the second of the se	by the ni-Clayo t of Reg o releas d again d which es may tificatio tish Col	Regional Distroquot for any ional District on any ional District on any ional district of any on any on any on any on any ionave or incurn, approval, eumbia Buildir these matter	rict of Alberni- purpose conn of Alberni-Clay nify the Regior demands, clair other person, p in consequence enforcement, cong Code and I/v	Clayoquot in connection with ected with the exercise of its roquot bylaws. In hal District of Albernims of action, suits, partnership or corporation or the of or incidental to the or failure to enforce the
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 F	Print
Oide and anal Address of Donas	hereby
Civic or Legal Address of Propert	ty – Please Print
authorize	as
Name of Agent –	Please Print
my/our agent to apply for a Permit to undertake registered owner(s), I/we understand and agre the construction is carried out according to law and the Building Code.	e that I/we am/are responsible to ensure that
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.bcassessment.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 5E8	www.safetyauthority.ca	(250) 716-5200 office 1-866-566-7233 (New Westminster toll free)
Bamfield Water System	Richard Zoet		r_zoet@telus.net	(250) 728-3301 (250) 720-8400 pager
Beaver Creek Improvement District		6038B Beaver Creek Rd Port Alberni, BC V9M 8X4	www.beavercreekwater.ca info@beavercreekwater.ca	(250) 723-9371 office
Cherry Creek Waterworks District		5920 Cherry Creek Road Port Alberni, BC V9Y 7L6	ccww@shaw.ca	(250) 723-2211 office
Emcon Services Inc.	Oliver Watson, Superintendant - Area 2	1435 Springhill Road Parksville, BC V9P 2T2	oliver_watson@emconservices.org www.emconservices.org	(250) 248-6212 office
Emcon Services Inc.	Craig Peterson, Road Foreman	4900 Maebelle Road Port Alberni, BC V9Y 7L6	no email address www.emconservices.org	(250) 724-6996
Ministry of Transportation and Infrastructure	Cindy Wells, Area Manager – Roads	3 rd Floor 2100 Labieux Road Nanaimo, BC V9T 6E9	cindy.5.wells@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	Jim Spalding, Government Agent	4070 – 8 th Avenue Port Alberni, BC V9Y 4S4	james.spalding@gov.bc.ca www.servicebc.gov.bc.ca	(250) 720-2040 office
Vancouver Island Health Authority	Glenn Gibson, Health Inspector	PO Box 1210 249 West Hirst Avenue Parksville, BC V9P 2H2	glen.gibson@viha.ca www.viha.ca	(250) 947-8222 office

REGISTERED ONSITE WASTEWATER PRACTITIONERS

http://wastewater.asttbc.org/c/documents/ROWPListing_020.pdf

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.