



Building Permit Application

Permit, Licence & Inspection Services

Date: _____ Zoning: _____ Folder No.: _____

Site Address: _____ Legal Description: _____

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> Single Family Dwelling | <input type="checkbox"/> Accessory | <input type="checkbox"/> Mobile Home/Temp Accessory * | <input type="checkbox"/> Commercial \$ _____ |
| <input type="checkbox"/> SFD with Sec Suite | <input type="checkbox"/> Addition/Alteration | <input type="checkbox"/> Multi-family | <input type="checkbox"/> Tenant Imp \$ _____ |
| <input type="checkbox"/> Secondary Suite | <input type="checkbox"/> Demolition/Removal | <input type="checkbox"/> Pool/Hot Tub * | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Basement Finish | <input type="checkbox"/> Agricultural | <input type="checkbox"/> Change of Owner/Use * | <input type="checkbox"/> Institutional |
| <input type="checkbox"/> Plumbing * | <input type="checkbox"/> Services | <input type="checkbox"/> Storm/Sanitary | <input type="checkbox"/> Sprinklers/Irrigation |

* Additional information required (please see reverse)

Project Description: _____

Applicant Name: _____

Address/City: _____ Postal Code: _____

Phone/Cell: _____ Fax: _____ Email: _____

Owner Name: _____

Address/City: _____ Postal Code: _____

Phone/Cell: _____ Fax: _____ Email: _____

Builder Name: _____

Address/City: _____ Postal Code: _____

Phone/Cell: _____ Fax: _____ Email: _____

Business Licence No: _____ Expiry Date: _____

- HEATING FUEL: Gas Electric Geothermal (P.Eng req'd) Other
- TYPE: Forced Air Hot Water In/Under Slab Heat Pump (location)
- STORM SYSTEM: Municipal Connection Surface (daylight/ditch/watercourse) Rock pit—R/C req'd
- SANITARY SYSTEM: Municipal Connection Septic (gravity/forced pumped line) Septic (lift pump) R/C req'd

I hereby confirm that the information supplied in support of this application is true and correct.

Applicant/Owner/Agent – Please Print

Signature

Company Name

Phone No.

Any personal information that is collected on this form will be managed in accordance with the Freedom of information and Protection of Privacy Act. Direct enquiries, questions, or concerns regarding the collection, use, disclosure, or safeguarding of personal information associated with this form to the Deputy Township Clerk, 20338 – 65 Avenue, Langley, BC V2Y 3J1 or phone 604.533.6101.

**Building Permit Application
Continued ...**

Swimming Pool/Hot Tub

VALUE OF WORK: _____

Pool: Inground Above ground Concrete Steel Aluminum Vinyl Lined
Hot Tub: Inground Above ground Covered Uncovered
Deck: Over 2' above grade Covered Uncovered Not applicable
Gazebo: Size: _____ Not Applicable

Mobile Home/Temporary Accessory

CONTRACT PRICE: New: _____ Used: _____

Standard: CSA A277-M1990 CAN/CSA Z240 MH Series-M86 CSA Z240
Addition: Not applicable To be constructed on site (plans req'd) Factory built
Year: _____ Make: _____ Model : _____ Serial # _____
CSA # _____ Size: _____ Registration # _____
Occupant: _____ Relationship: _____ Phone # _____

Plumbing

Number of fixtures:

Water Closet _____ Wash Basin _____ Kitchen Sink _____ Bar Sink _____ Shower Heads _____
Bathtub _____ Laundry Tray _____ Floor Drain _____ Roof Drain _____ Backflow _____
Auto Wash _____ Hot Water Tank _____ Urinal _____ Shower _____ Other _____

Change of Ownership

A Freehold Transfer or Title Search is required (no older than 30 days)

Schedules & sealed drawings from Engineer: New rec'd Letter from Engineer noting change of owner

Construction is underway Yes No
Letter from previous owner authorizing use of drawings Yes No
HPO form in new owner/builder's name Yes No
Cheque enclosed for bonds (damage/siltation/security) Yes No
Letter authorizing transfer of bond to new owner Yes No