## **Building Permit Application**



Building Permits protect your interests by providing an independent review to ensure that the materials and methods employed on your project are safe according to the minimum standards outlined in the BC Building Code and the District of Oak Bay Bylaws.

Date:				
Project Civic Address:				
Project Legal Description (Lot, Block, District Lot, Plan):			PID:	
Value of Construction (Include all materials, mechanical, labour and services):  Note: the Building Permit application fee is based on the value of construction and will vary for each application				
Applicant Name:				
Mailing Address:			Postal Code:	
Phone:		Email:		
Property Owner:				
Mailing Address:			Postal Code:	
Phone:		Email:		
Contractor Name:				
Mailing Address:			Postal Code:	
Phone:		Email:		
Application is made to: (please check all applicable)  Construction New Addition Relocate Renovation Demolish Other				
Proposed Use:  Residential Commercial Multi-Family Institutional Secondary Suite Other				
CONSTRUCTION DETAILS				
Number of Stories:	Number of Units:	Square Footage:	Number of Bedrooms:	
Number of Covered Parking Spaces:		Number of Off-street Parking Spaces:		
Type of Framing:  Masonry Wood Structural Steel Other				
Heating System:  Gas Oil Electric Other				

## **Building Permit Application**



Is the property located in a Development Permit Area? Yes No  If Yes, which one?				
Is a recent Title Search Attached (dated within 30 days)?				
Description of Project (please include a short paragraph explaini	ing key details):			
WAIVER OF LIABILITY: In consideration of the granting of this permit, I/we agree to release and indemnify the District of Oak Bay, its Council members, employees and agents from and again all liability, demands, claims, causes of actions, suits, judgements, losses, damages, costs, expenses of whatever kind I/we or any other person, partnership or corporation of my/our/their respective heirs, successors, administrator or assignees may have or incur in consequence of or incidental to the granting of this permit or any inspections, failure to I/we agree that the District of Oak Bay owes me/us no duty of care in respect to these matters.				
of the Freedom of Information and Protection of Privacy Act (FC process your application. Please note that as a result of this agrelated property records (excluding any personal information the	d on this form is authorized under the authority of Section 26(c) DIPPA). The information will be used by the District of Oak Bay to oplication, copies of any associated permits, plans and/or other erein) will be available to the public, either on a routine basis or questions regarding the collection, use and disclosure of personal poakbay.ca or 250-598-3311.			
<b>AGENT AUTHORIZATION:</b> The person signing this application, if the owner and that he is authorized to bind the owner who is de	f not the owner, acknowledges that this signature is as agent for eemed to know and understand the contents of this form.			
Signature of Applicant:	Please Indicate: Owner Agent			
	Date:			
OFFICE USE ONLY				
Application received by:	Date:			
Plumbing Folder No:	Building Folder No:			