



# Town of La Ronge Building Department

## Building Permit Application

### 1. Instructions

1. Complete all questions as fully as possible and include all additional information as requested. Your co-operation will ensure speedy processing of this Application.
2. Submit **two copies** of both Site Plan and complete Building Plans. Applications submitted without complete plans **cannot** be processed or referred to Council.
3. Please include separate sheet with Names, Addresses and Phone Numbers for Contractors and Sub-Trades.
4. **Remember** - submitting this Application **does not** authorize the start of construction.
5. **All Permit Applications must be submitted with Plans a minimum of 10 days prior to work commencement in order to ensure sufficient time for review and preparation of Building Permit.**

### A Building Permit Must Be Issued Before Any Work Can Begin

### 2. Site & Owner Information *(to be completed by Owner or Principal Contractor)*

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
*(if Company, also list name of contact person)*

Mailing Address: \_\_\_\_\_ Email: \_\_\_\_\_

Principle Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Email: \_\_\_\_\_

Nature of Work:  Single Family Residence     Storage Shed or Garage     Secondary Suite  
 Duplex     Apartments     Commercial or Industrial Building     Deck  
 Other: \_\_\_\_\_

This project is:  New work     Renovation or Alteration     Addition  
 Other: \_\_\_\_\_

Intended for:  Private use     Public use     Mixed use

The primary use of this building will be \_\_\_\_\_  
*(home, restaurant, warehouse, etc.)*

The Secondary use of this building will be \_\_\_\_\_  
*(if applicable)*

Project Value *(include costs of all materials, labour and installed systems)* \$ \_\_\_\_\_

Location: Civic Address: \_\_\_\_\_  
Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan #: \_\_\_\_\_

Will other properties be affected by this work?  No     Yes    *(if "Yes" please give location)*

Civic Address: \_\_\_\_\_  
Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan #: \_\_\_\_\_

\*\*\* On a separate sheet please provide the Names, Mailing Addresses and Phone numbers of the Principal Contractor and any person or firm providing sub-trades on this job.



3. Construction Details

- Foundations:  Full concrete basement  Full PWF basement  
 Concrete crawl space  PWF crawl space  
 Concrete grade beam & floor  Concrete footings  
 Pilings Other: \_\_\_\_\_

- A foundation plan certified by a professional engineer, showing dimensions and materials must accompany this Application.
- PWF foundations must comply with CSA Standard CAN-S406 Construction of Preserved Wood Foundations
- Foundations for Mobile Homes must comply with CSA Standard Z240.10.1 - Site Preparation, Foundation, and Anchorage of Manufactured Homes
- Floor plan and / or construction details must be included with the application.

- Rafters & Trusses:  Engineered rafters  Engineered trusses  
 Pre-built rafters  Pre-built trusses  
 Custom-built rafters  Custom-built trusses  
 Other: \_\_\_\_\_

\* Include Design Numbers for Engineered and Pre-built rafters & trusses

\* Include detailed plans and material list for Custom-built rafters & trusses

- Roofing:  Asphalt Shingles  Metal  Wood Shingle  
 Other: \_\_\_\_\_

Heating source(s):  Oil  Electric  Propane  Wood  Natural Gas

Chimney(ies):  Metal  Masonry  High Temp

Electrical -  No  Yes (Provincial permit required)

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing or Email Address: \_\_\_\_\_

Plumbing -  No  Yes (Municipal permits required)

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing or Email Address: \_\_\_\_\_

4. Applicant's Signature - My signature on this Application means I agree to comply with all requirements of the Town of La Ronge Building Bylaw and the National Building Code of Canada

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Building Department use Only

Permit Fee _____	Inspector's Approval <input type="checkbox"/> Yes <input type="checkbox"/> No
Receipt/Invoice # _____	Building Inspector _____
Pickup <input type="checkbox"/>	Council Approval <input type="checkbox"/> Yes <input type="checkbox"/> No
Date Paid _____	Date _____ Motion # _____
Assessment # _____	Land Value _____ Land Use _____
Alternate # _____ Improve _____	

- Office Use Only:
- SAMA
  - Building Report to Council
  - Stats Report