



## R.M. of Edenwold No. 158

Email: info@edenwold-sk.ca

Phone: (306) 771-2522

Fax: (306) 347-2970

### Building Permit Application

Civic Address:	Subdivision:	Permit Number:
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Legal Land Description: Lot _____ Block _____ Plan _____ Quarter _____ Section _____ Township _____ Range _____ W2M
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Owner:	Address: _____ City/Town _____ Postal Code _____	Telephone: Cell:
Building Contractor:	Address: _____ City/Town _____ Postal Code _____	Telephone: Cell:

### Floor Area:

Ground Floor: _____ ft <sup>2</sup> or m <sup>2</sup> (circle one)	Second Floor: _____ ft <sup>2</sup> or m <sup>2</sup> (circle one)	Basement: _____ ft <sup>2</sup> or m <sup>2</sup> (circle one)	Accessory/Other: _____ ft <sup>2</sup> or m <sup>2</sup> (circle one)
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### Building:

Estimated Value of Construction:	Length: _____ ft or m (circle one)	Width: _____ ft or m (circle one)	Height: _____ ft or m (circle one)
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### Read Through and Initial After Each Statement:

I have submitted a site plan indicating the location of all property lines, all existing and proposed buildings, the distances between all property lines and the closest wall of the nearest building, the location of all existing and proposed roads and a north arrow to establish the orientation of the site plan. \_\_\_\_\_

I hereby agree to comply with the Building Bylaw of the municipality and acknowledge that it is my responsibility to ensure compliance with the municipal building bylaw, provincial legislation, and the National Building Code of Canada, regardless of any review of drawings or inspections that may or may not be carried out by the inspector. \_\_\_\_\_

It is expressly understood that the municipality requires building inspections to be called for at various stages of construction, as outlined in the building bylaw, and that it is my responsibility to contact the municipal building inspector at the required intervals of construction will result in deductions from the occupancy deposit, in part or in whole, additional inspection fees, the issuance of stop work order, and/ or other action outlined in the municipal building bylaw. \_\_\_\_\_

I understand that this permit expires six months from the date of issue if work is not commenced within that period, or two years from the date on which the permit was issued; and any deviation, omission or revision to the approved application requires approval of Council, or its authorized representatives. \_\_\_\_\_

I understand that additional inspection fees may be charged for extra inspections, non-scheduled inspections and re-inspections. \_\_\_\_\_

\_\_\_\_\_  
Date of Application

\_\_\_\_\_  
Owner of Authorized Agent (print)

\_\_\_\_\_  
Owner/Agent (sign)

**Please plan on applying for a building permit 4 to 6 weeks before construction is set to begin to allow time for our Building Official to review the application.**



## Third Party Costs Acceptance Form

I, \_\_\_\_\_ of \_\_\_\_\_  
(please print name) (city, province)

do hereby authorize the Rural Municipality of Edenwold No. 158 to invoice third party costs to me in accordance with the Planning Fees Services Bylaw, which states that the Applicant shall be solely responsible for all of the costs associated with:

1. Fulfilling public notification requirements, including the cost of advertising and notifying stakeholders;
2. Engagement of required planning, engineering, legal, or other professional expertise necessary to review an application and/or implement Council's decision, including the cost of preparing agreements;
3. The cost per parcel to view land titles and plans of subdivision of the property proposed for development, amendment, or subdivision; and
4. Registration of an interest on the title of the property proposed for development, amendment, or subdivision as prescribed by the Information Services Corporation (Land Titles).

The information on this form is being collected under the authority of Section 27(a) of the *Local Authority Freedom of Information and Protection of Privacy Act* and will be used solely for the purpose of invoicing costs to the Applicant regarding their application.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

# Development Permit Application



100 HUTCHENCE ROAD, EMERALD PARK, SASKATCHEWAN, S4L 1C6 • PH: 306-347-2965 • FAX: 306-347-2970

<b>DP #</b>	<b>BP #</b>
<b>1. To be filled out by the Applicant (Owner):</b>	
Name:	Month      Day      Year
Street Address:	City/Town Postal Code:
Email:	Phone:      - Cell:      -
<b>2. Contractor (if applicable):</b>	
Name:	Company Name:
Street Address:	City/Town Postal Code:
Email:	Phone:      - Cell:      -
<b>3. Legal Land Location for proposed development:</b>	
Civic Address:	Lot:    Block:    Plan:      Ext:
Subdivision:	Quarter:    Section:    Township:    Range:    W2M
Registered Plan #:	Certificate of Title #:
<b>4. Existing Use of Land:</b>	
Current Zoning:	
Agriculture <input type="checkbox"/>	Residential <input type="checkbox"/> Other (Please describe)
Country Residential <input type="checkbox"/>	Industrial <input type="checkbox"/>
Commercial <input type="checkbox"/>	
Provide a detailed description of proposed use of land and/or buildings:	

\* Please note a proposed change in use may require a Building Permit Application for occupancy review.

# Development Permit Application



100 HUTCHENCE ROAD, EMERALD PARK, SASKATCHEWAN, S4L 1C6 • PH: 306-347-2965 • FAX: 306-347-2970

## 5. Site Servicing:

Parcel access provided by:

Grid Road	Highway	Main Farm Access	Other
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Water Supply provided by:	Municipal Waterline	Private Well	Other
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Sewage Disposal provided by:	Existing (please specify type of system)	Proposed (please specify type of system)
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Drainage provided by:	Existing (please specify)	Proposed (please specify)
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## 6. Surrounding land uses:

Are any of the following within 0.5 km of the proposed development?	If yes, please provide best estimate of distance
Intensive livestock operation <b>Yes/No</b>	
Sewage lagoon or wastewater treatment facility <b>Yes/No</b>	
Solid waste disposal facility or landfill <b>Yes/No</b>	
Stream or large body of water <b>Yes/No</b>	
Anhydrous ammonia facility <b>Yes/No</b>	
Industrial <b>Yes/No</b>	

## 7. Declaration by Applicant

I/We \_\_\_\_\_ hereby certify that I/we am/are the registered owner(s) of the lands and that the information given on this form and the site plan is full and complete and is, the best of my/our knowledge, a true statement of the facts relating to this application for development.

\_\_\_\_\_  
Date Signature

\_\_\_\_\_  
Date Signature

I/We, \_\_\_\_\_ hereby certify that I/we am/are the agent authorized to act on behalf of the registered owner(s) and hereby swear that all statements contained within this application are true, and I/we make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath, and by virtue of the Canada Evidence Act.

\_\_\_\_\_  
Date Signature

\_\_\_\_\_  
Date Signature

**Receipt #**

# Letter of Authorization



100 HUTCHENCE ROAD, EMERALD PARK, SASKATCHEWAN, S4L 1C6

PH: 306-771-2522

FAX: 306-347-2970

I, (We) \_\_\_\_\_ being the owner(s) of

Lot \_\_\_\_\_ Block \_\_\_\_\_ Plan \_\_\_\_\_ Ext \_\_\_\_\_

## Legal:

NW/NE/SE/SW Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ W2 Meridian give

\_\_\_\_\_ permission to

act on by (our) behalf in applying for a Development Permit for the above subject property.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Development Permit #**

# Residential Permit Information Form (PIF)

**Municipal Office Use Only**

Municipality: _____	Date: _____
Development Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	PBI Number: _____
Geotech Required: <input type="checkbox"/> Yes <input type="checkbox"/> No	Permit Expiry Date: _____
Municipal Official: _____	Signature: _____

**Information Below To Be Completed By The Applicant**

**Contact & Email Consent**

Building Owner: _____	Home Phone: _____
Mailing Address: _____	Cell Phone: _____
Email Address Owner: _____	
Contractor: _____	Business: _____
Contact Person: _____	Cell Phone: _____
Email Address Contractor: _____	
Signature: _____	Date: _____

\* I declare that I am the owner of this property, and I will notify PBI of any email changes if applicable.  
 \* By signing above, I consent to email delivery to all named above of PBI reports and related documents pertaining to this building permit.  
 \* Please note that failure to receive an emailed report or related documents does not release the property owner (s) from their responsibility to comply in all regards with the building standards (Saskatchewan Construction Code Act, Municipal Building Bylaws, and National Building Code of Canada).  
 \* Note that owners should always include themselves on this form.

**Jobsite Location**

Civic Address: \_\_\_\_\_

Legal Land Location: \_\_\_\_\_

Lot(s)                      Block                      Plan No

or:

Quarter Section                      Township                      Range                      Meridian

Description: \_\_\_\_\_

Subdivision / Landmark: \_\_\_\_\_

**Project Details**

1) **Value of Construction** (Total cost to owner for the work in its completed form. Includes cost of design, all building work, materials of construction, building systems, labour, overhead, and profit of the contractor and subcontractors)

Value of Construction: \_\_\_\_\_

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**\* Please fill in Sections 2a) plus 2b), or just Section 3)**

2a) **New Family Dwelling** (Select One Permit Type That Best Describes the Dwelling)

New Home                       RTM                       Post-Move                       Modular Home                       Duplex Unit  
(Requires two Applications)

2b) **Select Below ALL that Pertain to this Permit AND are included with the plans submitted to PBI for Review:**

Basement Development                       Deck                       Attached Garage (Insulated)                       Attached Garage (Not Insulated)

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3) **Residential Building Project** (Separate Permit is Required for Each Project Type)

Year the Existing Building was Constructed: \_\_\_\_\_

Addition                       Attached Garage                       Deck                       Basement Development

Renovation                       Roof Extension                       Sunroom                       Secondary Suite

Detached Garage                       Accessory Building                       Accessory Building w/Living                       Pole Building

Boat House                       New Foundation                       Retaining Wall                       Demolition



# Residential Plan Review Checklist

Box 517 Stn. Main  
White City, SK S4L5B1  
Ph: 306-536-1799  
Fax: 306-781-2112  
office@pro-inspections.ca

## Project Information

<b>Municipality:</b> _____	<b>PBI Number:</b> _____
<b>Job Site Address:</b> _____	<b>Project Type:</b> _____
<b>Owner's Name:</b> _____	<b>Cell Phone:</b> _____

## Residential Project Type

REQUIRED for a Plan Review	New Dwelling / Housing Unit	RTM / Modular / Post-Move	Mobile (Manufactured) Home	Addition / Living Space / Sec. Suite	Renovation (structural or egress)	Basement Development	Deck (not covered or enclosed)	* Attached Garage (unheated)	* Det Garage / Acc. Bldg. (unheated)	* Pole Building (unheated)	Retaining Wall (if collapse affects a structure)	Foundation Replacement	Solar Panels (PV or Hot Water)	Storage only - no living space & unheated
<p>Provide <b>designs and required documents in PDF format</b> as indicated by the unshaded boxes for the project (shaded box means not required).</p> <p>A plan review must be completed by PBI <u>before</u> a building permit is issued.</p> <p style="color: red;">E-mail plans and documents in PDF format to the <a href="#">municipal office</a>.</p> <p><i>Requirements may vary for unique or larger projects. Please consult with PBI.</i></p>														
<b>Site Plan</b> (e.g. lot size & shape; indicate North; project size on lot, distance to all property lines, indicate what borders each property line, label streets, etc.)														
<b>Building Plans</b> (e.g. floor plans, exterior elevations, cross sections, structural details, window & door types, sizes & locations, stair configurations, material lists, specs, etc.)														
<b>Energy Code Forms</b> (applicable to compliance option, code edition & climate zone)														
<b>Building Designs stamped by an engineer</b> (project specific for <u>intended use</u> *)														
<b>Foundation Designs stamped by a structural engineer</b> (site specific)														
<b>Geotechnical Report</b> (if required by zoning bylaws or engineer recommendation)														
<b>PBI Specifications sheet</b> ( <i>plus all information requested in the sheets</i> )														
<b>Information Below is Required BEFORE THE FRAMING INSPECTION</b>														
<b>Engineer-stamped roof truss designs &amp; layouts</b> (NBC compliant)														
<b>Engineer-stamped floor truss and/or LVL designs &amp; layouts</b>														
<b>Fireplace or Wood Stove Manufacturer Specifications</b>														
<b>Residential Mechanical Ventilation Design Summary</b>														

**\* Pole Building** (Please detail intended use. Note if vehicles will be repaired in the building, if building is for personal or business use, etc.)

<b>Signature:</b> _____	<b>Date:</b> _____
<p>* I declare that I am the owner of this property, and I will notify PBI of any email changes if applicable.</p> <p>* Please note that failure to receive an emailed report or related documents does not release the property owner (s) from their responsibility to comply in all regards with the building standards (Saskatchewan Construction Code Act, Municipal Building Bylaws, and National Building Code of Canada).</p>	

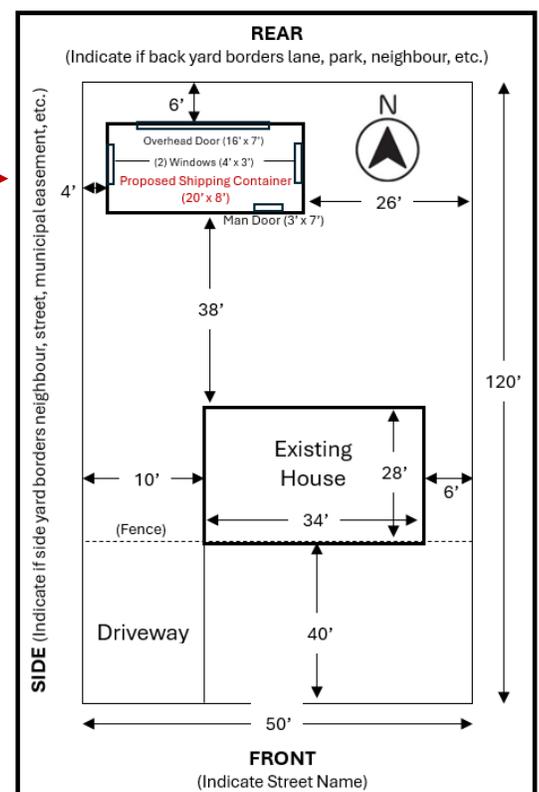
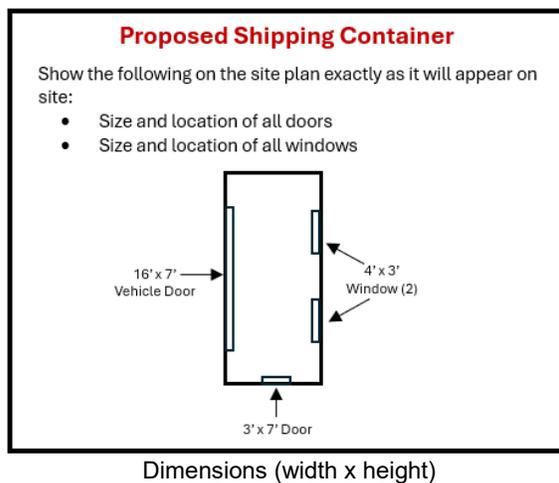
## Project Information

<b>Municipality:</b> _____ <b>Building Owner:</b> _____ <b>Job Site Address:</b> _____	<b>Project Type:</b> _____ <b>Cell Phone:</b> _____
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### (1) Provide a SITE PLAN sketch on a separate sheet and note the following:

- Draw the **property (lot) shape** (rectangular, pie-shape, etc.)
- Indicate the **North** direction
- Note the **lot dimensions** (indicate ft or m): Front/Rear (width) / Side Yard (length)
- Label the **street/road name** in the front yard (primary access).
- Note **what borders the property** on each side (lane, neighbour, street, park, lake, etc.)
- Draw the **existing house** on the lot (to scale)
- Draw the **shipping container** on the lot (to scale). Show **stair detail**, if applicable.
- Note the shipping container's **dimensions** (indicate ft or m)
- Note the **distance to the property lines** on all sides of the proposed shipping container (indicate ft or m).
- Draw any **other buildings** on the same property (e.g. shed, etc.) and note their dimensions.
- Note the closest **distance** of the shipping container **to the house and other buildings** on the same property.
- Show the **location** of easements (state the width), retaining walls, lanes, driveways, etc.
- Show **location and sizes of all doors and windows** for the proposed shipping container ON THE SITE PLAN.

### Site Plan Example:



### \*\*\*Important:

A plan review cannot be completed without a proper **Site Plan** submitted.

**(2) Complete ALL information below regarding the proposed shipping container:**

**Shipping container dimensions:** (indicate feet or metres)

- Width:** \_\_\_\_\_
- Length:** \_\_\_\_\_
- Height** (grade to top of sea can): \_\_\_\_\_
- Size** (in ft<sup>2</sup>): \_\_\_\_\_

**Foundation:**

- Piles & Grade Beam
- Concrete Slab Floor (Dimensions): \_\_\_\_\_ (W x L)
- Concrete Slab Thickness (Edge): \_\_\_\_\_ (inches)
- Concrete Slab Thickness (Interior): \_\_\_\_\_ (inches)

(NOTE: Part 4 engineer-stamped foundation/anchorage designs are required)

- Other Foundation Type: \_\_\_\_\_

(NOTE: If municipality requires a geotechnical report, consult your Building Official on foundation requirements)

**Number of portable extinguishers:** \_\_\_\_\_

Class: \_\_\_\_\_ Size: \_\_\_\_\_ lbs

- Maximum travel distance to a portable fire extinguisher with a 2A-10B-C rating is 9 metres (29.5') and the maximum travel distance to a portable fire extinguisher with a 4A-20B-C rating is 15 metres (49') (NFPA 10 - 6.1.3.2.)
- In buildings over 500 m<sup>2</sup> a portable fire extinguisher with a 4A-80B rating shall be installed with a maximum travel distance 25m.

**Proposed Use of shipping container:**

\_\_\_\_\_

**Will the shipping container be insulated?** (If yes, note type)

- No  Yes  Spray Foam
- Batt  Foam Board  \_\_\_\_\_

**Heating source?** (If yes, note type)

- None
- Gas Furnace  In-Floor Heat  \_\_\_\_\_

**Will there be sleeping rooms in the shipping container?**

- No  Yes (# of occupants): \_\_\_\_\_

If yes, smoke alarms are required and if occupied year-round, energy compliance forms are required

**Will there be a bathroom in the shipping container?**

- No  Yes (2 piece)  Yes (3 piece)

If yes, an exhaust fan is required

**Will the shipping container be used for the storage of dangerous goods?** (if yes, describe type and volume)

- No  Yes
- Type: \_\_\_\_\_
- Volume: \_\_\_\_\_

**(3) Please provide the following:**

- Site Plan (as described in step 1)
- Part 4 Engineer-stamped Foundation/Anchorage Designs
- Part 4 Engineer-stamped Structural Designs for any Modifications (ex. windows, doors) Made to the Shipping Container
- Part 4 Engineer Review of the Structure
- Floor Plan Layout

If shipping container is for non-residential use, please also provide:

- Building Code Analysis