



R.M. of Edenwold No. 158

Email: info@edenwold-sk.ca

Phone: (306) 771-2522

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Building Permit Application

Civic Address:	Subdivision:	Permit Number:
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Legal Land Description: Lot _____ Block _____ Plan _____

Quarter _____ Section _____ Township _____ Range _____ W2M

Owner: Address: _____ City/Town _____ Postal Code _____	Telephone: Cell: _____
Building Contractor: Address: _____ City/Town _____ Postal Code _____	Telephone: Cell: _____

Floor Area:

Ground Floor: ft ² or m ² (circle one)	Second Floor: ft ² or m ² (circle one)	Basement: ft ² or m ² (circle one)	Accessory/Other: ft ² or m ² (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 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)



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



Demolition Permit Application

Applicant Name:	_____	Date:	_____
Email:	_____	Phone #:	_____
Mailing Address: _____			
Legal Land Description - Lot: _____ Blk/Par: _____ Plan No.: _____ Ext.: _____			
Quarter:	_____	Section:	_____ Township: _____ Range: _____ W2

1. Property Owner Information (if different from applicant)

Property Owner's (P.O.) Name: _____
P.O.'s Email: _____ P.O.'s Phone #: _____
P.O.'s Mailing Address: _____

2. Contractor Information (if different from applicant)

Contractor's Name: _____
Contractor's Email: _____ Contractor's Phone #: _____
Contractor's Mailing Address: _____

Please provide a site plan showing all existing buildings, the dimensions of buildings to be demolished, and detailed descriptions of how the site will be remediated.

3. Demolition Information

Civic Address of Building Location (if different from above):

Legal Land Description of Building Location (if different from above):



Demolition Permit Application

4. Permit Conditions

Permission is hereby granted to _____ to demolish a(n) _____ from civic address (legal land description) _____ in accordance with all developer and municipal regulations and the following conditions:

1. All demolition debris shall be disposed of at an approved recycling or landfill facility.
2. If asbestos is discovered before or during demolition, the applicant must:
 - i. Comply with all Occupational Health and Safety Regulations involving its removal;
 - ii. Follow the regulations outlined in *The Transportation and Dangerous Goods Act* in taking the material to an approved landfill facility; and
 - iii. Obtain the proper permits from the landfill operator to dispose of the asbestos in the landfill.
3. The site shall be remediated to its pre-development condition and to the satisfaction of the RM. The applicant shall contact the RM to arrange a site visit once remediation is complete.
4. That the Code of Practice for Safety in Demolition of Structures is adhered to insofar as practical.

Applicant Signature: _____ Date: _____

Development Officer Signature: _____ Date: _____

<i>Office Use Only</i>
Date Received: _____
Fee Submitted: _____
Receipt #: _____
Permit #: _____
Deposit Required: _____



Commercial Permit Information Form (PIF)

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

Municipal Office Use Only

Municipality: _____ Date: _____
Development Approved: Yes No PBI Number: _____
Geotech Required: Yes 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:	
Designer:	Business:
Contact Person:	Cell Phone:
Email Address Designer:	
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.
* By signing above, I consent to PBI sharing my Plan Review with my designer(s).
* 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
Description:			
Subdivision / Landmark:			

Project Details

1a) Select Below ALL that Pertain to this Permit AND are included with the plans submitted to PBI for Review:
<input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Renovation <input type="checkbox"/> Accessory Building <input type="checkbox"/> Tenant Improvement <input type="checkbox"/> Demolition
1b) Select Below the type of Building this Permit is for:
<input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional
2) 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: _____

Demolition Declaration Form

Re:

Name of Owner (Print)

Civic Address or Land Location of Demolition Site

Type of building to be demolished:

Owners are responsible:

- To have all underground facilities located prior to commencing demolition and removal,
- To have hazardous material handled and disposed of in compliance with provincial regulations,
- To obtain prior written approval of the Local Authority should it become necessary to close or block any road, street, lane, or sidewalk during demolition,
- To supply and maintain, at their own expense, all fencing, boarding or barricades that may be required to warn and/or protect the public from the work in progress during demolition,
- To take site safety measures at the demolition site in conformance with part 8 of the 2020 NBC and Saskatchewan Occupational Health and Safety requirements to ensure that no person is exposed to undue risk,
- To ensure fire safety at the demolition site conforms to Section 5.6 of the 2020 National Fire Code,
- To ensure that all building components, substructures or framework located below ground level have been removed and disposed of in the proper manner,
- To ensure waste material generated from the demolition, including any and all concrete from a basement and/or foundation, is not buried on the site but removed from the site and disposed of at an approved location,
- To ensure backfill is graded to prevent drainage towards the excavation after settling,
- To fill and level any excavation on the property with clean non-expansive fill, to an elevation compatible with abutting properties,
- Upon completion of a demolition, to remove all garbage and building materials from the property and to ensure that the property is left in a safe and sanitary condition,
- To take due diligence to ensure no contamination of asbestos or mercury take place
- To check with Sask Environment (or their regulations) for the requirements regarding testing possible contaminated products, and disposal of these products
- To check with Occupational Health and Safety for requirements regarding Asbestos (if present in the building)

I, the undersigned, understand my responsibilities as the owner of this property and agree to uphold the terms listed above.

Signature of Registered Owner

Date