



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: |
|----------------|--------------|----------------|

| |
|--|
| 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 <small>(circle one)</small> | Second Floor: _____ ft ² or m ² <small>(circle one)</small> | Basement: _____ ft ² or m ² <small>(circle one)</small> | Accessory/Other: _____ ft ² or m ² <small>(circle one)</small> |
|---|---|---|--|

Building:

| | | | |
|----------------------------------|---|--|---|
| Estimated Value of Construction: | Length: _____ ft or m <small>(circle one)</small> | Width: _____ ft or m <small>(circle one)</small> | Height: _____ ft or m <small>(circle one)</small> |
|----------------------------------|---|--|---|

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.

Commercial Permit Information Form (PIF)

| Municipal Office Use Only | |
|--|---------------------------|
| Municipality: _____ | Date: _____ |
| Development Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No | PBI Number: 24- _____ |
| 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: _____ | |
| 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.
 * 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: _____ | |
| or: | |
| Description: _____ | |
| Subdivision / Landmark: _____ | |

Project Details

| | |
|--|---|
| * Please fill in Sections 1a) plus 1b), or just Section 2) | |
| 1.a) 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 |
| 1.b) 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: | _____ |

This document must be submitted to PBI by the municipal office

Development Permit Application



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

PH: 306-771-2522

FAX: 306-347-2970

| | |
|--|--|
| DP # | BP # |
| 1. To be filled out by the Applicant (Owner): | |
| Name: | Month Day Year |
| Street Address: | City/Town Postal Code: |
| Email: | Phone: - Cell: - |
| 2. Contractor (if applicable): | |
| Name: | Company Name: |
| Street Address: | City/Town Postal Code: |
| Email: | Phone: - Cell: - |
| 3. Legal Land Location for proposed development: | |
| Civic Address: | Lot: Block: Plan: Ext: |
| Subdivision: | Quarter: Section: Township: Range: W2M |
| Registered Plan #: | Certificate of Title #: |
| 4. Existing Use of Land: | |
| 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: | |
| | |

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5. Site Servicing:

Parcel access provided by:

| | | | |
|-----------|---------|------------------|-------|
| Grid Road | Highway | Main Farm Access | Other |
|-----------|---------|------------------|-------|

| | | | |
|---------------------------|---------------------|--------------|-------|
| Water Supply provided by: | Municipal Waterline | Private Well | Other |
|---------------------------|---------------------|--------------|-------|

| | | |
|------------------------------|--|--|
| Sewage Disposal provided by: | Existing (please specify type of system) | Proposed (please specify type of system) |
|------------------------------|--|--|

| | | |
|-----------------------|---------------------------|---------------------------|
| Drainage provided by: | Existing (please specify) | Proposed (please specify) |
|-----------------------|---------------------------|---------------------------|

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 Yes/No | |
| Sewage lagoon or wastewater treatment facility Yes/No | |
| Solid waste disposal facility or landfill Yes/No | |
| Stream or large body of water Yes/No | |
| Anhydrous ammonia facility Yes/No | |
| Industrial Yes/No | |

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

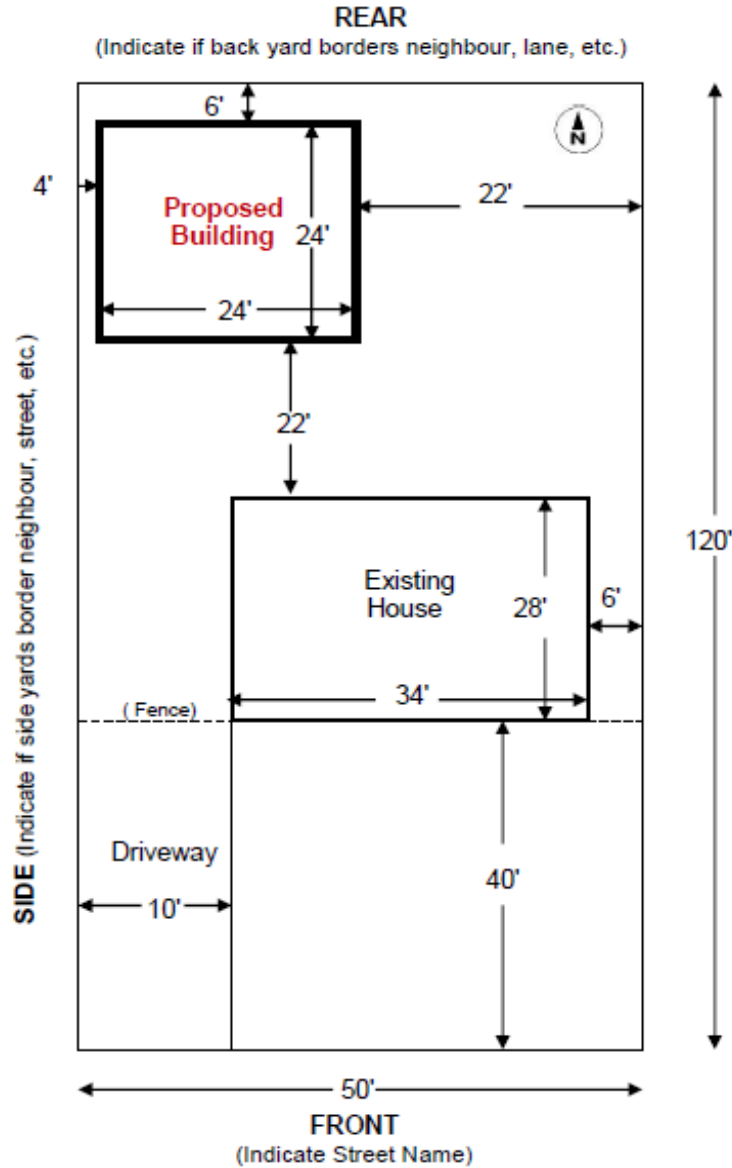
act on by (our) behalf in applying for a Development Permit for the above subject property.

Signature

Date

Development Permit #

Residential – Sample Site Plan



Solar Panels - PBI Specifications



Owner Name: _____ Municipality: _____
Owner: (Cell) _____ (H) _____ Jobsite Address: _____

Solar Photovoltaic (PV) or Water Heating (SHW) Installation

(1) Provide the following documents with your application, where applicable:

- Product listing** from supplier(s) verifying that all components to be installed are **CAN/ULC certified**.
- Manufacturer specifications** for PV and/or SHW components (i.e. design and installation requirements).
*** Note that SHW systems must be installed in accordance with Saskatchewan Plumbing Regulations.
Battery storage, if applicable, must indicate ventilation & space clearance requirements.
- Electrical line diagrams** for solar PV installations. **(NOTE: Commercial installations require P.Eng. seal)**
*** Note that all solar PV installations require an **electrical permit** from SaskPower.
- Roof truss designs** (engineer-stamped) or letter from a Structural Engineer (project-specific).
Engineer designs or letter must indicate: (a) that their review conforms to NBC 2015 - Part 4, (b) anticipated dead loads (e.g. weight of panels, supports and racking), (c) anticipated live loads (e.g. snow and wind loads for the area), (d) maximum anticipated point load on framing members, (e) maximum panel array height above surface of roof (re: uplift and forces on mounting attachments), and (f) additional structural information relevant to the project.
- Roof-mount plan and layout**, indicating: (a) roof surface type and dimensions, (b) panel and anchor layout, noting dimensions, spacing and weight, (c) method of attachment, (d) distance between roof surface and underside of panels, if parallel-mounted, (e) maximum height above roof ridge, if tilt mounted, (f) racking/rail lengths and details (g) flashing and sealant type, (h) provisions for fire fighting, and (i) additional structural information relevant to the project.

(2) Complete the information below regarding the proposed installation:

Installation (Building or Property Type):

- Residential Commercial Industrial

Solar Panel Type: (Select all that apply)

- Photovoltaic Water Heating _____

Solar Service Type: (Select all that apply)

- Grid-Tied Battery Storage (off-grid)
 Water Heating _____

Mounting Location:

- Roof (sloped) Roof (flat) Canopy
 Ground Pole _____

Foundation Type (for ground, pole or canopy):

- Concrete Piles Screw Piles Concrete Slab

*** Engineer-stamped foundation designs are required.

Panel Orientation

- Portrait Landscape _____

Mounting Type:

- Flush Parallel Ballasted
 Fixed Tilt Tracking _____

If Tilted, Maximum Height above Roof Ridge:

Roof Truss or Rafter Spacing:

- 16" o.c. 24" o.c. _____

Roof Trusses or Rafters:

- Solar Ready Roof Trusses (Engineered)
 Roof Trusses (Engineered but not built solar ready)
 Rafters

Name of Truss Manufacturer or Engineer:

Roof Slope (Pitch): (e.g. 4/12) _____

Roof Sheathing Type & Thickness:

- OSB Plywood _____
 3/8" 7/16" _____

Roof Surface/Shingle Type:

- Asphalt Metal _____

Array Directly Fastened To:

- Truss/Rafter Blocking _____

Racking Type:

- Railed Rail-free Shared-rail



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