

R.M. of Edenwold No. 158

Email: info@edenwold-sk.ca Phone: (306) 771-2522 Fax: (306) 347-2970

Building	Permit	Annlic	ation
Dunania	rennit	Applic	auvii

Civic Address:			Subdiv	ision:		Pe	ermit Number:	
Legal Land Description: Lot	BI	ockPla	n			•		
Quarter Section	Towns	hipRange	W2I	М				
Owner:	Addre	55:			Teler	ohone:		
Building Contractor:	City/T	ownPo	stal Cod	le	Teler	ohone:		
ballating contractor.		SS:			Cell:			
Floor Area:	City/1	ownPo	stai Coo	le				
Ground Floor:ft² or m² (circle one)	Secon (circle o	d Floor: ft² or m²	ft² or m²			Accessory,	Accessory/Other:ft² or m² (circle one)	
Building:								
Estimated Value of Construc	tion:	Length: ft or m	m Width: ft or m				Height: ft or m	
nearest building, the location of all ex I hereby agree to comply with the Bui provincial legislation, and the National It is expressly understood that the mu	the location isting and positing and position is building Control in the control is the control	n of all property lines, all existic roposed roads and a north arround for the municipality and acknowledge of Canada, regardless of a quires building inspections to go inspector at the required intork order, and/or other action or the date of issue if work is the approved application required.	ow to est wledge th iny reviev be called ervals of outlined s not com- uires appu	tablish the orientation of the control of the contr	of the sit to ensurcions that construin deducing bylav riod, or to uthorize	re compliance at may or may uction, as out ctions from th w two years froi ed representa	e with the municipal building bylaw, y not be carried out by the inspector lined in the building bylaw, and that it is ne occupancy deposit, in part or in whole m the date on which the permit was tives	
Date of Application	 Ov	wner of Authorized Age	nt (prir	nt)		 Ow	ner/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.



Residential Permit Information Form (PIF)

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

	Inspections	, Inc.			`	,	office@pro-inspections.c
		<u>Muni</u>	cipal O	ffice Use	Only		
D	Municipalit evelopment Approve Geotech Require Municipal Officia	d: □ Yes □ No d: □ Yes □ No			Permit Exp	Date: Number: iry Date: gnature:	24-
	<u>In</u>	formation Below	To Be (Complete	ed By The A	pplicant	<u>!</u>
		Co	ntact & E	mail Cons	ent		
	Building Owner:				Home P	hone:	
	Mailing Address:				Cell Ph	one:	
Em	nail Address Owner:						
	Contractor:				Busine	ess:	
	Contact Person:				Cell Ph	one:	
Emai	I Address Contractor	:			_		
	Signature:				Date):	
Note	that owners should alw	ays include themselves		rm. Location			
L	egal Land Location:						_
		Lot(s)	Block		Plane No		
	or: Description:	Quarter Section	Township		Range		Meridian
Sul	bdivision / Landmark:						
			Projec	t Details			
* Pleas	se fill in Sections 1a)	plus 1b), or just Sectio		t Details			
1a)	Single Family Dwellin	g (Select One Permit Type	That Best		0,		
	□ New Home	□RTM	☐ Post-I	Move	☐ Modular H	ome	□ Duplex Unit
1b)	Select Below ALL that	Pertain to this Permit Al	ND are inc	luded with	the plans submi	tted to PBI	for Review:
	☐ BasementDevelopment	□ Deck		☐ Attache	ed Garage ated)		ched Garage t Insulated)
2)	<u> </u>	Project (Separate Permit is	Required	•	·	`	<u> </u>
	☐ Addition	☐ Attached Gara		□ Deck		□ Bas	sement Development
	☐ Renovation	☐ Roof Extension	1	□ Sunro	om	□ Sec	ondary Suite
	☐ Detached Garage	☐ Accessory Buil	ding	☐ Access w/Living	sory Building	□ Pole	Building
	☐ Boat House	☐ New Foundation	on	☐ Retain	ing Wall	□ Dem	nolition



Municipality:

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

PBI Number:

Job Site Address:				Тур	e:									
Owner's Name: Cell Phone:														
	ı		T	Re	esid	lent	ial I	Pro	ject	Туј	_			
REQUIRED for a Plan Review				. Suite					ated)		s a structure)			unheated
Provide <u>designs and required documents in PDF format</u> as indicated by the unshaded boxes for the project (shaded box means not required).	sing Unit	t-Move	ed) Home	Addition / Living Space / Sec.	or egress)	nent	(pesolo	(unheated)	Bldg. (unheated)	ted)	(if collapse affects	ment	Hot Water)	Storage only - no living space & unheated
A plan review must be completed by PBI <u>before</u> a building permit is issued.	/ Hous	·/Pos	acture	ng Spa	ructural	elopr	ed or end	i ge (un	cc. Bl	(unheated)		place	(PV or	- no livir
E-mail plans and documents in PDF format to the municipal office.	elling	odular	Manuf	/ Livi	ion (st	nt Dev	t covere	l Gara	ge / A	Building	g Wall	ion Re	Panels	only
Requirements may vary for unique or larger projects. Please consult with PBI.	New Dwelling / Housing	RTM / Modular / Post-Move	Mobile (Manufactured) Home Addition / Living Space / Sec		Renovation (structural or egress)	Basement Development	Deck (not covered or enclosed)	* Attached Garage	* Det Garage / Acc.	* Pole Buil	Retaining Wall	Foundation Replacement	Solar Pa	Storage
Site Plan (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.)														
Building Plans (e.g. floor plans, exterior elevations, cross sections, structural details, window & door types, sizes & locations, stair configurations, material lists, specs, etc.)														
Energy Code Forms (applicable to compliance option, code edition & climate zone)														
Building Designs stamped by an engineer (project specific for intended use*)														
Foundation Designs stamped by a structural engineer (site specific)														
Geotechnical Report (if required by zoning bylaws or engineer recommendation)														
PBI Specifications sheet (plus all information requested in the sheets)														
Information Below is Required BEFORE THE FRA	MIN	G II	NSP	ECT	ION									
Engineer-stamped roof truss designs & layouts (NBC compliant)														
Engineer-stamped floor truss and/or LVL designs & layouts														
Fireplace or Wood Stove Manufacturer Specifications														
Residential Mechanical Ventilation Design Summary														
* Pole Building (Please detail intended use. Note if vehicles will be repaired in the buildi	ina, it	build	dina i	s for	perso	onal o	or bus	sines	s use	, etc	.)			
	<u></u>		<u> </u>								,			

Signature:	Date:	
		-

PBI - Rev. Dec 31, 2022 Page 1 of 1

^{*} I declare that I am the owner of this property, and I will notify PBI of any email changes if applicable.

^{*} 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).

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 Residential	Other (Please describe)
Country Residential Industrial	
Commercial	
Provide a detailed description of proposed use of land a	nd/or buildings:

Development Permit Application



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

PH: 306-771-2522

FAX: 306-347-2970

5. Site Servicing: Parcel access provided by:							
Grid Road	Highway	Main Farm	Access	Other			
Water Supply provided by:	Municipal Waterline	Private We	ell	Other			
Sewage Disposal provided by:	Existing (please specify ty	ype of system)	Proposed (ple	ase specify type of system)			
Drainage provided by:	Existing (please specify)		Proposed (ple	ase specify)			
6. Surrounding land uses:	l		l				
Are any of the following with proposed development?	in 0.5 km of the	If yes,	please provide bes	et estimate of distance			
Intensive livestock operation	Yes/No						
Sewage lagoon or wastewater treatment facil	Yes/No lity						
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							
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

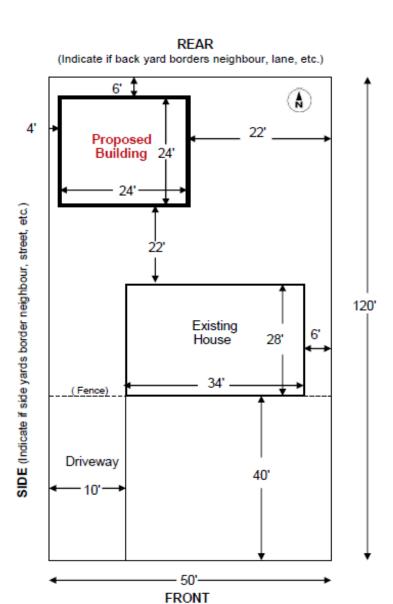
I, (We)				being the owner(s) of
Lot	Block	Plan	Ext	
Legal:				
NW/NE/SE/	SW Section	Township	Range	W2 Meridian give
				permission to
act on by (c	our) behalf in apply	ring for a Development	Permit for the above	e subject property.
Signature			_	
 Date			_	

Development Permit #

5 Gregory Avenue East Box 517 Stn. Main White City, SK S4L 5B1 Ph: 306-536-1799

Fax: 306-781-2112 Email: office@pro-inspections.ca Website: www.pro-inspections.ca

Residential - Sample Site Plan



PBI - Rev. Oct 11, 2019 Page 1 of 1

(Indicate Street Name)

Solar Panels - PBI Specifications



Owner Name:			Municipality:						
Owner: (Cell)		_ (H)	Jobsite Address:						
	Solar Pho	otovoltaic (PV) or Water	Heating (SHW)) Installation					
(1) Provide the f	ollowing docun	nents with your application	on, where applic	able:					
☐ Product listing	g from supplier(s) v	verifying that all components to	be installed are C	AN/ULC certified.					
*** Note that SI	 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. 								
	_	r PV installations. (NOTE: Cor ons require an electrical perm			g. seal)				
Engineer designation (e.g. weight of maximum antice	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	e information be	elow regarding the propos	sed installation:						
Installation (Bui ☐ Residential	Iding or Proper		Roof Truss or Rafter Spacing: ☐ 16" o.c. ☐ 24" o.c. ☐						
Solar Panel Typ Photovoltaic	Water Heating		Roof Trusses or Rafters: ☐ Solar Ready Roof Trusses (Engineered) ☐ Roof Trusses (Engineered but not built solar ready)						
Solar Service Ty Grid-Tied Water Heating	■ Battery Storage	(off-grid)	☐ Rafters						
Mounting Locat	ion:		Name of Truss Manufacturer or Engineer: ☐						
☐ Roof (sloped) ☐ Ground	☐ Roof (flat) ☐ Pole	☐ Canopy ☐	Roof Slope (Pit	t ch): (e.g. 4/12)	<u> </u>				
Foundation Typ Concrete Piles *** Engineer-stam	☐ Screw Piles	or canopy): Concrete Slab lesigns are required.	Roof Sheathing Type & Thickness: OSB Plywood						
Panel Orientation ☐ Portrait	on ☐ Landscape		Roof Surface/S	Shingle Type:					
Mounting Type: Flush	Parallel	☐ Ballasted	Array Directly I ☐ Truss/Rafter						
Fixed Tilt If Tilted, Maximum	☐ Tracking um Height abov	⊔ e Roof Ridge:	Racking Type:	☐ Rail-free	☐ Shared-rail				



Applicant Signature

Third Party Costs Acceptance Form

١,	of							
	(please print name)	(city, province)						
accord	•	of Edenwold No. 158 to invoice third party costs to me in Bylaw, which states that the Applicant shall be solely th:						
1.	Fulfilling public notification requiren stakeholders;	nents, including the cost of advertising and notifying						
2.		ngineering, legal, or other professional expertise necessary ement Council's decision, including the cost of preparing						
3.	The cost per parcel to view land title development, amendment, or subdi	s and plans of subdivision of the property proposed for vision; and						
4.		e of the property proposed for development, amendment, aformation Services Corporation (Land Titles).						
Author	_	ed under the authority of Section 27(a) of the <i>Local</i> ction of <i>Privacy Act</i> and will be used solely for the purpose their application.						

Date