PERMIT RMMK-22-___ **APPLICATION FOR DEVELOPMENT PERMIT**

1)	Applicant (Mus	t be registered owne	r):		
	Registered Owr	ner			
	Mailing Address	S			
	Contact Numbe	er	Email		_
2)	Property (Civic	or Legal or Land Loca	tion):		
	Civic or Jobsite	Address ————			
	Lot	Blk	Plan		
	Part	Section	Township	Range	W2
	Certificate of Ti	tle No	Date		
3)	Lot Size:				
	Dimensions		Area		
4)	Existing Land U	se:			

6) DOCUMENTS TO INCLUDE FOR ALL DEVELOPMENT APPLICATIONS

- a) Site Plan showing the following:
 - i) Site dimensions & shape, side yard, front yard & rear yard setbacks.
 - ii) Location, size and use of all existing and proposed buildings or structures & easements dimensioned to the site lines.
 - iii) Distance between Principal and Accessory Building.
- b) Site topography and special site conditions (which may require a contour map) including ponds, streams, other drainage runs, culverts, ditches, and any other drainage features.
- c) The location and size of trees and other vegetation, especially natural vegetation, street trees, and mature growth.
- d) Proposed on-site and off-site services.
- e) A Geo-Tech Report provided by an Engineer.

")	I IIVIELINE
	a) Start Date:
	b) Estimated Completion Date:
8)	Other Information
9)	Mobile Homes: C.S.A. Z240 Approval Number
10)	Modular/RTM: C.S.A. Z277 Approval Number
11)	Park Model Home: C.S.A. Z241 Approval Number
12)	Modular date of Manufacture

Bulyea SK S0G 0L0 Bulyea SK S0G 0L0

Development Officer Telephone: 306-725-3258 Email: rm220devofficer@rm220.ca

13) DECLARATION OF A	APPLICANT		
l,	of the	of	
In the Province of	, do S	Solemnly declare that the above stat	tements contained
within the Application a	re true, and I make thi	is solemn declaration conscientious	ly believing it to be
true and knowing that i	t is of the same force a	and effect as if made under oath, an	d by virtue of <i>"The</i>
Canada Evidence Act".			
I agree to indemnify and	d hold harmless the Ru	ural Municipality of McKillop from a	nd against any claims,
demands, liabilities, co	sts, and damages rel	lated to the development underta	aken pursuant to this
application.			
Date		Property Owner	

Office address: 103 Ashley Street P. O. Box 220

Mailing address: Bulyea SK S0G 0L0 Bulyea SK S0G 0L0 **Development Officer** Telephone: 306-725-3258 Email: rm220devofficer@rm220.ca

FOR M	UNICIPAL OFFICE USE C	NLY:				
RMMK	-22-					
1.	Present Zoning:					
2.	Proposed Use(s):					
3.	Proposed Setbacks:	Front	Rear	Side 1	Side 2	<u> </u>
4.	Size of Building	Length	Width	Height		
5.	Application Status:	Meets Bylaw	Requirement			
		Does Not Mee	et Bylaw Requirem	nents		
Date				Developn	nent Officer	

Office address: Mailing address: 103 Ashley Street P. O. Box 220 Mailing address: Bulyea SK S0G 0L0 Bulyea SK S0G 0L0

Development Officer Telephone: 306-725-3258 Email: rm220devofficer@rm220.ca

FORM A - APPLICATION FOR BUILDING PERMIT

I hereby make application for a permit to:		Construct	Permit #	RMMK-22-			
		Alter Reconstruct	Alt#				
a building according to the in Applicant (must be complete			cuments at	tached to this application.			
Registered Owner							
Mailing Address							
Property (Civic or Legal or La	nd Location):						
Civic Address	•						
				Range W			
Certificate of Title No.							
Nature of work:							
Intended use of building:							
				ght			
Number of storeys: Number of stairways: Number of exits:		Width of	stairways:				
Foundation Soil Classification	Туре:						
Footings: Foundation: Exterior Walls: Roof: Studs: Floor Joists: Girders: Rafters: Chimneys: Heating: Estimated Cost of Construct Building Are I hereby to agree that it is m authority and with any other	Materia Materia Materia Materia Materia Materia Materia Materia Materia Number Materia Lighting tion (excluding site): ea (of largest storey:	l: l: l: l: sure compliance wi	th the Build	ling Bylaw of the local			
inspections that may or may	• •	_	_				
 Date		Prope	erty Owner				



Box 517 Stn. Main White City, SK S4L 5B1

Ph: 306-536-1799 Fax: 306-781-2112 E-mail: office@pro-inspections.ca

Residential – Permit Information Form

Municipal Office Use Only

	PBI Permit #:RMMK-22-s all zoning bylaws and/or is approved in principle.) or engineer recommendation.)
Permit Application Date: Permit Expir	y Date:
Date Sent to PBI: Administrator	Name:
Method Sent (mail, fax, e-mail): Sig	nature:
<u>Information Below Can Be Completed E</u> <u>Contact Information:</u>	By The Applicant
Registered Owner:	Home: (306)
Mailing Address:	Bus: (306)
E-mail:	Cell: (306)
Contractor:Contact Person:	Bus: (306) Fax: (306)
E-mail:	Cell: (306)
Same as Registered Owner	
Applicant's Name:	Ph: (306)
Same as Registered Owner Same as Contract Jobsite Location:	or
Civic Address:	Plan No.
1/4, Section Townsh	
Subdivision:	· ,
Landmark or Reference:	
(Note directions that will assist the Build	ing Official in findin gth ejobsite)
Single Family Dwelling (Select one permit type that best describes the New Home Duplex Unit Cottage RTM Post-M Select on line below ALL that pertain to this permit and are included with Basement Development Deck Attached Garage (Insulated	ove Mobile (Manufactured) Home the plans submitted to PBI for review:
Residential Building Project (Separate permit is required for <u>each</u> proj Addition Renovation Deck Basement Development Sunroom New Foundation Retaining Wall Roof Ext Attached Garage Detached Garage Accessory Building	t Secondary Suite
Insulated: Yes No Comments:	
Dimensions: Length: ft. x Width: ft. x Height:	ft. Size: ft²
Finished Areas: Main: ft ² 2 nd Storey:	ft² Bsmt: ft²
Start Date: Estimated Completion	Date:



PBI - Rev. January 1, 2019

5 Gregory Avenue East - Unit 5 Box 517 Stn. Main White City, SK S4L 5B1

Ph: 306-536-1799 Fax: 306-781-2112

* Storage only - no living space & unheated

Page 1 of 1

Email: office@pro-inspections.ca Website: www.pro-inspections.ca

Permit #:

Residential - Plan Review Checklist

Municipality:

Jobsite Address:					Project Type:								_	
Owner's Name:					Cel	l Ph	: _							_
			Residential Pro							oject Type				
REQUIRED for	a Plan Review	ا ا		9	Suite					eated)		ructure)		
(A shaded box me	eans <u>not required</u> .)	U	ove	lom	ec. S	ess)		_	ted)	(unhe		cts a st	ᆂ	er)
Provide <u>designs and required documents in PDF format</u> as indicated by the unshaded boxes for the project. A plan review must be completed by PBI <u>before</u> a building permit is issued.			RTM / Modular / Post-Move	Mobile (Manufactured) Home	Addition / Living Space / Sec.	Renovation (structural or egress)	Basement Development	Deck (not covered or enclosed)	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)
	uments in PDF format <u>icipal office</u> .	New Dwelling / Housing Unit	Modu	e (Man	on / Livi	vation	nent D	(not cov	Attached G	Garage	Build	ning W	dation	Panels
Requirements may vary for some	projects. Please consult with PBI.	New	RTM/	Mobil	Additi	Reno	Baser	Deck	* Atta	* Det	* Pole	Retair	Foun	Solar
Site Plan (eg. lot size & shape; indicate No property lines, indicate what borders each	property line, label streets, etc.)													
Building Plans (eg. floor plans, exterior window & door types, sizes & locations, st	elevations, cross sections, structural details, air configurations, material lists, specs, etc.)													
Energy Code Forms (applicable to cor														
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 zo	oning bylaws or engineer recommendation)													
Manufacturer's Blocking Chart an	d anchorage details													
PBI Specifications sheet (plus all info	ormation requested in the sheet(s)													
Informati	on Below is Required BEFORE THE	FR	AMI	NG	INSI	PEC	1OIT	N						
Engineer-stamped roof truss desi	gns & layouts (NBC compliant)													
Engineer-stamped floor truss and	/or LVL designs & layouts													
Fireplace or Wood Stove Manufac	turer Specifications													
Residential Mechanical Ventilatio	n Design Summary													
* Pole Building (Please detail intende	d use. Note if vehicles will be repaired in the bu				g is fo	r pers	sonal	or bu	ısines	ss use	e, if h	eated	, etc.)
	E-MAIL CONSENT ports and related documents pertaining to this be able to always include themselves on this form):				giver	to th	ne folle	owing	g indi\	⁄idual	ls inv	olved	in th	е
Title (Eg. Owner, Contractor) Individual's Name E-mail Address														
Owner														
comply in all regards with the buildi National Building Code of Canada).	an e-mailed report or related document does ng standards (Saskatchewan Uniform Building s property and I will notify PBI of any e-mail ch	and A	lcces	sibilit	y Sta									
Name:	Signature:	_					Date	:						
								_						

Owner must complete and sign the E-Mail Consent Form

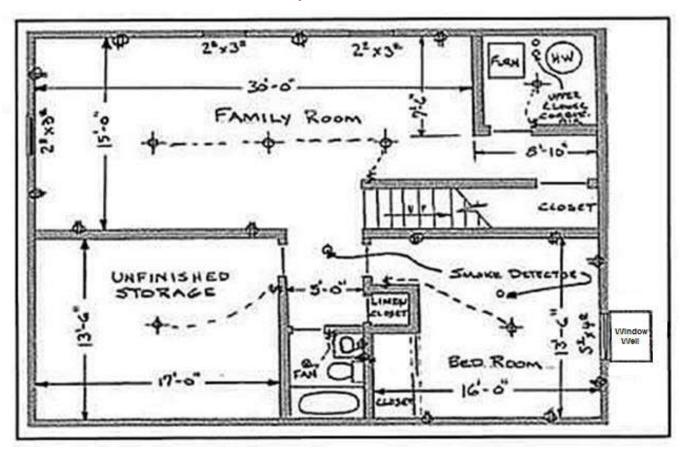


Basement Development - PBI Specifications

(1) Provide a floor plan SKETCH on a separate sheet and note the following:

Ш	Draw the perimeter walls of the basement and note the total area to be developed (ft² or m²).
	Draw the room layout (existing and proposed rooms) and show the location of the stairs (note width.)
	Note the dimensions of all rooms (indicate ft or m).
	Label the intended use of each room (e.g. Rec Room, Bathroom, Bedroom, Utility, Office, Storage, etc.)
	Show all walls, partitions, closets, doorways and windows.
	Draw the door swing direction on all doorways and note the door width .
	Note the window sizes for each basement window and note the window opening type in each bedroom.
	If applicable, show the proposed fireplace location and type (i.e. natural gas, wood burning, electric, etc.)
	Using symbols, note the locations of smoke alarms (①) and CO alarms (①) (combine symbols for combination units.
	For bathrooms , show the locations of fixtures (sink, toilet, tub) and exhaust fan.
	For kitchenettes, note the location of cabinets, counters, sinks, and appliances, including cooktops.
	For secondary suites , please submit architectural drawings prepared by an experienced designer, as NBC
	requirements are significantly different for secondary suites than basement developments

Sample Floor Plan

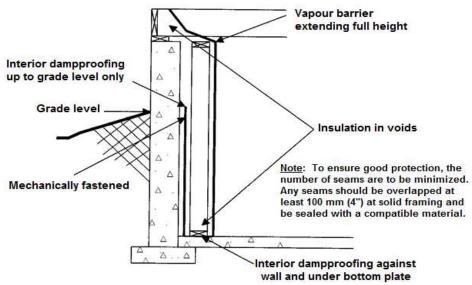


- ☐ Answer all questions on page 2 and submit with your floor plan.
- ☐ Please contact PBI at (306) 536-1799 if you have any questions.



Owner Name:		Municipality:		
Owner: (Cell) (306)	(H) (306)	Jobsite Address:		

Foundation Wall Vapour Barrier & Interior Dampproofing



	be sealed wi	ar a companible mater	11
	ν Δ Δ		
	Interior damppro	oofing against	
	wall and under		
		And a second control of the second control o	
(2) Complete the information below regarding the propo	sed developmen	it:	
Total Area Being Developed (indicate ft² or m²):			
Foundation Perimeter Walls Are Currently:	Stairs Protecte	ed Bv:	
☐ Exposed ☐ Framed ☐ Insulated	☐ Wall	Guards-36" H	П
☐ Vapour Barrier ☐ Sheathed ☐			<u> </u>
	Proposed Ceili	na Type:	
Protection from Dampness:	☐ Suspended		П
☐ PT Bottom Plate ☐ Poly / Sill Gasket ☐	— опорожиеся	— •)p. • •	—
- I Postorii I lato - I I siy / oiii odonot - I	Proposed Ceili	i ng Height: (NBC	minimum noted)
Bedroom/Sleeping Room Window Types:	2.1m (6'-11")		,
☐ Casement ☐ Awning-Inswing ☐ Awning-Outswing	—	<u> </u>	_
□ Slider □	Fireplace:		
<u> </u>	☐ None	☐ Natural Gas	☐ Electric
Bedroom Window Sizes: (Note below as W" x H")		g (stove or insert)	
1 2 3		's installation specifica	
· · · · · · · · · · · · · · · · · · ·	•	·	,
Bedroom Window Unobstructed Opening:	Smoke Alarm I	nstalled In:	
1 2 3	☐ Bedroom(s)	☐ Hallway	☐ Common Area
(Openable portion must not be less than 0.35m² (3.8 ft²) in area, with no	_	_ ,	_
dimension less than 380mm (15"), and must have 760mm (30") minimum	Carbon Monox	ide (CO) Alarm	s Installed:
clearance space in the window well when window is in the open position.)			each bedroom door
		, —	
Door Sizes (W" x H") and Quantity (note below)	Proposed Bath	room:	
☐ 24" x 78" ☐ 30" x 78" ☐ 32" x 78"	□ None	2 piece	3 or 4 piece
(min-bathroom) (min-bedroom) (min- furnace room)	_		
(min-bathroom) (min-bedroom) (min- furnace room) # # #	Bathroom Fan	Exhausts To:	
	☐ Outdoors	☐ House Ventila	ation System (HRV)
Secondary Suite Proposed?			, ,
□ No □ Yes	Kitchen Fan Ex	khausts To:	
(If Yes, please provide a floor plan prepared by an experienced designer.)	Outdoors	☐ House Ventila	ation System (HRV)