R.M. of McKillop No. 220

Office address:
103 Ashley Street
Bulyea SK S0G 0L0

Mailing address:
P. O. Box 220
Bulyea SK S0G 0L0

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

PERMIT RMMK-21-__
APPLICATION FOR DEVELOPMENT PERMIT

1) Applicant (Must be registered owner):

Name _____

Address _____ City _____ Prov. _____ PC _____

Telephone Number _____ Email _____

2) Property (Civic or Legal or Land Location):

Civic _____

Lot _____ Blk _____ Plan _____

Part _____Section _____ Township _____ Range _____ W2

Certificate of Title No. _____ Date _____

3) Lot Size:

Dimensions _____ Area _____

4) Existing Land Use:

5) Proposed Land Use/Description of Proposed Development:

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Bulyea SK S0G 0L0

Mailing address:
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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.

7) TIMELINE

a) Proposed Date of Commencement: _____

b) Proposed Date of Completion: _____

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 _____

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13) DECLARATION OF APPLICANT

I, _____ of the _____ of _____

In the Province of _____, do Solemnly declare that the above statements contained within the Application are true, and I 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"*.

I agree to indemnify and hold harmless the Rural Municipality of McKillop from and against any claims, demands, liabilities, costs, and damages related to the development undertaken pursuant to this application.

_____ _____

Date **Property Owner**

Office address:
103 Ashley Street
Bulyea SK S0G 0L0

Mailing address:
P. O. Box 220
Bulyea SK S0G 0L0

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

FOR MUNICIPAL OFFICE USE ONLY:

RMMK-21-__

1. Present Zoning: _____
2. Proposed Use(s): Principal _____
   Accessory _____
3. Proposed Setbacks: Front _____ Rear _____ Side 1 _____ Side 2 _____
4. Size of Building Length _____ Width _____ Height _____
5. Application Status: Meets Bylaw Requirement _____
   Does Not Meet Bylaw Requirements _____

Other Regulations/Comments/Conditions:

_____

_____

_____

_____

_____ _____

Date **Development Officer**

R.M. of McKillop No. 220

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FORM A - APPLICATION FOR BUILDING PERMIT

I hereby make application for a permit to:

- ☐ Construct
- ☐ Alter
- ☐ Reconstruct

Permit # _____

Alt # _____

a building according to the information below and to the plans and documents attached to this application.

Applicant (must be completed by the registered owner):

Name _____

Address _____ City _____ Prov. _____ PC _____

Telephone Number _____ Email _____

Property (Civic **or** Legal **or** Land Location**):**

Civic _____

Lot _____ Blk _____ Plan _____

Part _____ Section _____ Township _____ Range _____ W2

Certificate of Title No. _____ Date _____

Nature of work: _____

Intended use of building: _____

Size of building: Length _____ Width _____ Height _____

Number of storeys: _____ Fire Escapes: _____
Number of stairways: _____ Width of stairways: _____
Number of exits: _____ Width of exits: _____

Foundation Soil Classification Type: _____

Footings:		Material:		Size:	
Foundation:		Material:		Size:	
Exterior Walls:		Material:		Size:	
Roof:		Material:		Size:	
Studs:		Material:		Spacing:	
Floor Joists:		Material:		Spacing:	
Girders:		Material:		Spacing:	
Rafters:		Material:		Spacing:	
Chimneys:		Number:		Size:	
		Material:		Thickness:	
Heating:		Lighting:		Plumbing:	

Estimated Cost of Construction (excluding site): _____

Building Area (of largest storey: _____

I hereby to agree that it is my responsibility to ensure compliance with the Building Bylaw of the local authority and with any other applicable bylaws, acts and regulations regardless of any plan review or inspections that may or may not be carried out by the local authority or its authorized representative.

_____ _____

Date **Property Owner**

Professional Building Inspections, Inc.

5 Gregory Avenue East – Unit 5
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 - Plan Review Checklist

Municipality: _____ **Permit #:** _____

Jobsite Address: _____ **Project Type:** _____

Owner's Name: _____ **Cell Ph:** _____

Residential Project Type

REQUIRED for a Plan Review (A **shaded box** means not required.) Provide **designs and required documents in PDF format** as indicated by the unshaded boxes for the project. A plan review must be completed by PBI before a building permit is issued. **E-mail plans and documents in PDF format to the municipal office.** *Requirements may vary for some projects. Please consult with PBI.*	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)
Site Plan (eg. 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 (eg. 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)						■							■
Manufacturer's Blocking Chart and anchorage details	■	■		■	■	■	■	■	■	■	■	■	■
PBI Specifications sheet *(plus all information requested in the sheet(s)*	■	■		■				■		■	■	■	
Information Below is Required BEFORE THE FRAMING INSPECTION													
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						■	■	■	■	■	■	■	■

* Storage only - no living space & unheated

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

E-MAIL CONSENT FORM

Consent to the e-mail delivery of PBI reports and related documents pertaining to this building permit is given to the following individuals involved in the construction project (note that owners should always include themselves on this form):

Title (Eg. Owner, Contractor)	**Individual's Name**	**E-mail Address**
Owner		

- *Please note that failure to receive an e-mailed report or related document does not release the property owner(s) from their responsibility to comply in all regards with the building standards (Saskatchewan Uniform Building and Accessibility Standards Act, municipal building bylaws, and National Building Code of Canada).*
- *I declare that I am the **owner of this property** and I will notify PBI of any e-mail changes, if applicable.*

Name: _____ **Signature:** _____ **Date:** _____

Professional Building Inspections, Inc.

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

Municipality: _____ PBI Permit #: RMMK-21-

Development Approved: ☐ No ☐ Yes (Proposed construction meets all zoning bylaws and/or is approved in principle.)

Geotech Report Required: ☐ No ☐ Yes (If required by zoning bylaws or engineer recommendation.)

Permit Application Date: _____ Permit Expiry Date: _____

Date Sent to PBI: _____ Administrator Name: _____

Method Sent (mail, fax, e-mail): _____ Signature: _____

Information Below Can Be Completed By The Applicant

Contact Information:

Registered Owner: _____ Home: (306) _____

Mailing Address: _____ Bus: (306) _____

E-mail: _____ Cell: (306) _____

Contractor: _____ Bus: (306) _____

Contact Person: _____ Fax: (306) _____

E-mail: _____ Cell: (306) _____

☐ Same as Registered Owner

Applicant's Name: _____ Ph: (306) _____

☐ Same as Registered Owner ☐ Same as Contractor

Jobsite Location:

Civic Address: _____

Legal Land Description: Lots(s) _____ Block _____ Plan No. _____

_____ ¼, Section _____ Township _____ Range _____ W 2

Subdivision: _____

Landmark or Reference: _____

(Note directions that will assist the Building Official in finding the jobsite)

Project Details:

Single Family Dwelling (Select one permit type that best describes the dwelling):

☐ New Home ☐ Duplex Unit ☐ Cottage ☐ RTM ☐ Post-Move ☐ Mobile (Manufactured) Home

Select on line 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)

Residential Building Project (Separate permit is required for each project type):

☐ Addition ☐ Renovation ☐ Deck ☐ Basement Development ☐ Secondary Suite

☐ Sunroom ☐ New Foundation ☐ Retaining Wall ☐ Roof Extension

☐ Attached Garage ☐ Detached Garage ☐ Accessory Building ☐ Pole Building ☐ Boat House

Insulated: ☐ Yes ☐ No **Comments:** _____

Dimensions: Length: _____ ft. x Width: _____ ft. x Height: _____ ft. | **Size:** _____ ft²

Finished Areas: Main: _____ ft² | 2nd Storey: _____ ft² | Bsmt: _____ ft²

Start Date: _____ **Estimated Completion Date:** _____

MOBILE (MANUFACTURED) HOME – PBI SPECIFICATIONS

(Steel Chassis – Deformation Resistant)

Professional Building Inspections, Inc.

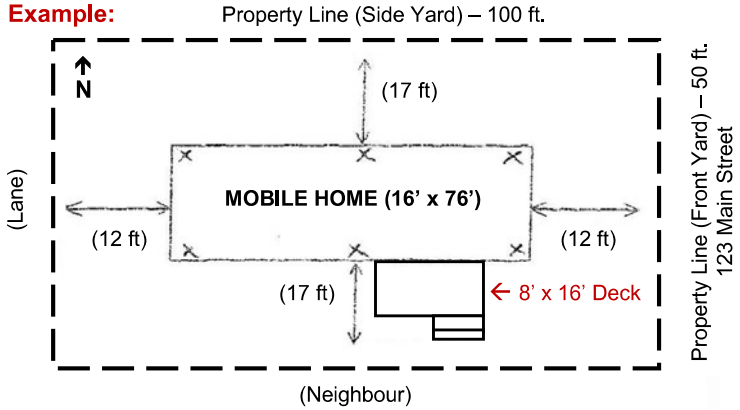
Owner Name: _____ Municipality: _____

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

Site Plan (on a separate sheet, draw and note the following):

- ☐ Draw property shape and note dimensions (indicate ft or m).
- ☐ Indicate North direction.
- ☐ Draw mobile/manufactured home and note dimensions.
- ☐ Note distance of home to the property lines (in four directions).
- ☐ Show location of all doors and windows and note their sizes.
- ☐ Note distance of home to other buildings on the same property.
- ☐ Indicate location of ground anchors with "X's" (see example below)
- ☐ Label street name(s), roads, lanes, etc. that border property.
- ☐ Draw location and size of landings and/or deck, including stairs.
- ☐ For new deck, complete and submit PBI Deck Specifications.

Example:

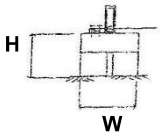


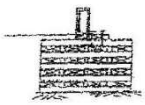
Foundation

*** Pier spacing must conform to the manufacturer's blocking chart.

☐ **Submit a copy of the manufacturer's blocking chart to PBI.**

Pier Type: (Check One)





☐ Pressure-treated (PT) Lumber (_____ x _____)

☐ Wood Cribs
Size of Pier: (H) _____ x (W) _____
(Note: Piers must be at least as wide as they are high)

☐ Concrete Blocks
(Recommend 1/4" plywood is put between each stacked block to reduce stress on the blocks and increase resistance to lateral movement.)

Footing Type: (Check One)

☐ Concrete Pad ☐ PT Lumber (2" x 6" - 3 layers)

Unreinforced concrete footings beneath piers must be at least 100 mm (4") thick and must not project beyond the pier by a distance greater than their thickness (CSA Z240 6.2.3.)

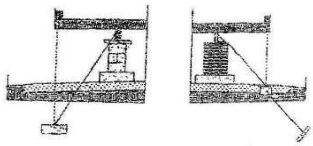
☐ Piles (Diameter:_____ & Depth:_____)

☐ Reinforced Concrete ☐ Helical Screw Piles

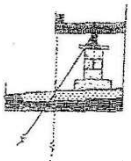
Ground Anchors

*** **Anchoring is to conform to manufacturer's specifications and CSA Z240.10.1, "Site Preparation, Foundation, and Anchorage of Manufactured Homes" (NBC 9.23.6.3.)**

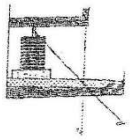
Ground Anchor Type: (Check One)



☐ Concrete "deadman" anchors



☐ Ground auger type

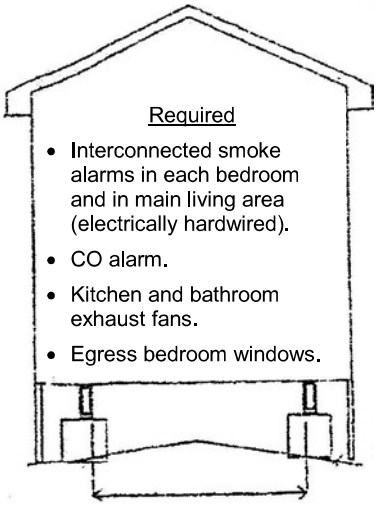


☐ Duckbill type anchor

☐ Concrete Pile

☐ Reinforced Concrete Slab

Site Preparation & Crawl Space



Site Preparation

- Min. 2% grade to beyond home
- Gravel sub-base
- 6 Mil Poly Ground Sheet (CAN/CGSB 51.34 M86)
- Sand / Dirt / Gravel topping

Crawl Space

- Skirting Type: (Check One)
  - ☐ Pressure-treated wood
  - ☐ Vinyl
  - ☐ Metal
- Ventilation required (1 ft² / 500 ft² floor area)
- Access hatch required (20"x28")

Information Required:

- Is the home CSA-A277 certified? ☐ Yes ☐ No (See below)
  (If no, then a NBC compliance inspection is required.)
- Is the home CSA-Z240 certified? ☐ Yes ☐ No (Above applies)
- Is a detailed Site Plan included? ☐ Yes ☐ No (Must be provided)
- Is page 3 of PBI Deck Specifications included? ☐ Yes ☐ No deck
- Is manufacturer's blocking chart included? ☐ Yes ☐ No (Required)
- Provide information below (found on the CSA or Intertek label located at the electrical panel or inside of the kitchen cupboard):

Manufacturer: _____

Year Built: _____ **Weight:** _____ (lbs or kg)

Size: _____ (Width) x _____ (Length) (ft or m)

Cert/Issue No: _____

Professional Building Inspections, Inc.

ENERGY EFFICIENCY COMPLIANCE FORM

Section 9.36. of the National Building Code of Canada (NBC)

Submit the design option section(s) for a new building, addition or major alteration to comply to NBC 9.36.

All calculations must be completed by a competent person* and be attached to this form to be considered complete and accepted for review.

* **Competent Person** means a person, firm or corporation who is knowledgeable and experienced in the application of NBC Section 9.36. for the design of buildings and/or building systems.

Owner Name:				**Permit Number (Office Use):**	
Project Address:					
Occupancy Type:		**Floor Area (m^2)**		**Climate Zone**	**7A**

Design Option:

☐ **Prescriptive** — Complete Section 'A'

☐ **Trade-Off** — Complete Sections 'A & B'

☐ **Performance** — Complete Section 'C'

Section A (Part 1): Prescriptive

HRV: ☐ Yes ☐ No

Additional information that must be submitted for review:

☐ Window & door schedule
☐ RSI assembly calculations
☐ Air tightness drawings
☐ CSA F280 calculations

Effective Thermal Resistance of Above Ground Opaque Building Assemblies (RSI)			
Assembly	**w/ HRV**	**w/o HRV**	**Proposed**
Ceilings below attics	8.67	10.43	
Cathedral / Flat roofs	5.02	5.02	
Wall joists	2.97	3.08	
Rim joists	2.97	3.08	
Floors over unheated spaces	5.02		
Floors within garage	4.86		
Thermal Characteristics of Fenestration, Doors and Skylights (U)			
Assembly	**Efficiency**		**Proposed**
Windows & Doors (provide window & door schedule)	Maximum U-Value 1.60 *or* Minimum Energy Rating ≥ 25		
One door exception	Maximum U-Value 2.60		
Attic hatch	Minimum RSI_{eff} 2.60		
Skylights	Maximum U-Value 2.70		
Effective Thermal Resistance of Below-Grade or In-Contact-With-Ground Opaque Building Assemblies (RSI) [Frost line depth for zone 7A is 2.4 m (8 ft.)]			
Assembly	**w/ HRV**	**w/o HRV**	**Proposed**
Foundation Walls	2.98	3.46	
Slab-On-Grade with Integral Footing	2.84	3.72	
Unheated Floor Below Frost Line	uninsulated	uninsulated	
Unheated Floor Above Frost Line	1.96	1.96	
Heated Floors	2.84	2.84	

Contact information for person who completed Section A (Part 1 of 2):

Firm Name:		**Ph:**		**Date:**	
Person Name:		**Email:**			

Section A (Part 2): Prescriptive

HVAC Equipment Performance Requirements				
Equipment	**Capacity KW**	**Standard**	**Min. Efficiency**	**Proposed**
Gas Fired Furnace (w or w/o A/C)	≤ 65.9	CSA P.2	AFUE≥ 92%	
	> 65.9 & ≤ 117.23	CAN/CSA-P.8	E_t ≥78.5%	
Electric Boiler	≤ 88	**(1)**		
Gas Fired Boiler	≤ 88	CSA P.2	AFUE ≥ 90%	
	> 88 & ≤ 117.23	AHRI BTS	E_t ≥ 83%	
Other				
Heat **Loss** Calculations (BTU)	☐ Calculations were prepared in conformance with CSA F280 standards			
Heat **Gain** Calculations (BTU)	☐ Calculations were prepared in conformance with CSA F280 standards			
Nomenclature	**AFUE**= annual fuel utilization efficiency, **E_t**= thermal efficiency			

Water Heater Performance Requirements				
Equipment	**Capacity KW**	**Standard**	**Min. Efficiency**	**Proposed**
Tank Storage (Electric)	≤ 12 kW (50 L to 270 L capacity)	CAN/CSA-C191	SL ≤ 35 + 0.20V (top inlet)	
			SL ≤ 40 + 0.20V (bottom inlet)	
	≤ 12 kW (>270 L and ≤ 454 L capacity)		SL ≤ (O.472V) - 38.5 (top inlet)	
			SL≤ (0.472V) - 33.5 (bottom inlet)	
	>12 kW (>75 L capacity)	ANSI Z21.10.3/CSA 4.3 & DOE 10 CFR, Part 431, Subpart G	$S = 0.30 + 27 / V_m$	
Tank Storage (Gas Fired)	< 22 kW	CAN/CSA-P.3	EF ≥ 0.67 — 0.0005V	
	≥ 22 kW	ANSI Z21.10.3/CSA 4.3	E_t ≥ 80% and standby loss≤rated Input/(800 + 16.57)(√V)	
Tankless (Gas Fired)	≤ 73.2 kW	CAN/CSA-P.7	EF ≥ 0.8	
	> 73.2 kW	ANSI Z21.10.3/CSA 4.3 and DOE 10CFR, Part 43I, Subpart G	E ≥ 80%	
Tankless (Electric)	No standard addresses the performance efficiency; however, their efficiency typically approaches 100%			
Other				
Nomenclature	**EF** = energy factor in %/h, **E_t** = thermal efficiency **S** = standby loss in %h, **SL** = standby loss in W, **V** = volume **V_m** = measured storage volume in US gallons			

(1) Must be equipped with automatic water temperature control. No standard addresses the performance efficiency; however, their efficiency typically approaches 100%.

Contact information for person who completed Section A (Part 2 of 2):					
Firm Name:		**Ph:**		**Date:**	
Person Name:		**Email:**			

Section B: Trade Off

All calculations must be completed by a competent person and attached to this form in order to be considered complete and accepted for review. The location and extent of assemblies used in the calculation shall be clearly identified on the drawings by hatch or note.

Additional information that must be submitted for review:
- ☐ Section A (Parts 1 & 2) completed in their entirety.
- ☐ RSI assembly calculations indicating trade-off calculations.

☐ **Opaque to Opaque –** One or more above-ground opaque building envelope assemblies are permitted to be less than required, provided one or more above-ground opaque building envelope assemblies are increased to more than required.

- Walls and joist type roofs must maintain minimum 55% of the required RSI_{eff}
- All other assemblies must maintain minimum 60% of the required RSI_{eff}
- The sum of the areas of all traded assemblies divided by their RSI_{eff} must be less than or equal to what it would have been if all assemblies had met NBC 9.36.2.6.

☐ **Transparent to Transparent –** One or more windows are permitted to be less than required, provided one or more windows are increased to be more than required.

- The traded windows must have the same orientation.
- The sum of the areas of all traded windows divided by their RSI_{eff} must be less than or equal to what it would have been if all windows had met NBC 9.36.2.7.

☐ **Opaque to Transparent –** This option is meant to allow reduced insulation for factory-constructed buildings with a low floor to ceiling height and a fenestration and door area to gross wall area ratio of 15% or less.

Contact information for person who completed Section B:					
Firm Name:		**Ph:**		**Date:**	
Person Name:		**Email:**			

Section C: Performance (Page 1 of 2)

This option is available only to houses with or without secondary suites, and buildings that contain only dwelling units with common spaces that are less than 20% of the building's total floor area.

Full modelling summary reports for the reference and proposed house, completed by a competent person and generated from Hot 2000 v15 or an ANSI/ASHRAE 140 compliant software, is required to be submitted with this form to be considered complete and accepted for review.

Additional information that must be submitted for review:
- ☐ Window & door schedule.
- ☐ Building assembly details (i.e. thoroughly complete "**Proposed House - Building Assembly Details**" section below).
- ☐ If less than 3.2 air exchanges are used in the proposed model, provide vapour barrier installation details.
- ☐ Full modelling summary reports for Reference Model and Proposed Model.

Input Parameters		Reference Model	Proposed Model
Airtightness (air exchanges per hour @ 50 Pa)			
Heat Loss / Heat Gain			
HRV efficiency			
Thermal mass (MJ/m^{20}C)			
Ventilation rate (l/s)			
Fenestration and door to wall ratio (FDWR) – reference (%)			
Direction of front elevation (highlight or shade one in each column)		N NE E SE S SW W NW	N NE E SE S SW W NW
Area of windows and doors	Front elevation (m^2)		
	Rear elevation (m^2)		
	Left elevation (m^2)		
	Right elevation (m^2)		
	Total area of windows (m^2)		
	Total area of opaque doors (m^2)		
Energy use (GJ)			

Proposed House - Building Assembly Details:

	Framing	Insulation		
Ceiling:	" o.c. Gable/Cathedral	R - Batt or spray foam	**Furnace Size:**	00,000 BTU
Exterior Wall:	2" x @ " o.c.	R -	**Furnace Rating:**	? %
Tall Wall:	2" x @ " o.c.	R -	**Water Heater:**	? %
Foundation Wall:	2" x @ " o.c.	R -	**HRV:**	☐Yes ☐No
Floor Headers:		R -	**Air Conditioner:**	? SEER
Cantilever/Bonus Rm:	2" x @ " o.c.	R -	**Air Barrier (NBC):**	9.25 &/or 9.36
Slab:	☐ None ☐ Int ☐ Ext / (1.2m)	4 " thick - Rigid or Spray Foam	**Attic Hatch:**	2.60 U-Value
Cladding Type:			**Doors (U-Values):**	
Comments:			**Windows: (List all U-Values)**	

Section C: Performance (Page 2 of 2)

Software Information			
Software Title:		**Version:**	
Is software Hot 2000 v15 or ANSI/ASHRAE 140 compliant?		☐ Yes ☐ No	

Contact information for person who completed Section C:			
Firm Name:		**Name:**	
Address:		**Phone:**	
Address:		**Email:**	

I hereby certify that the calculations submitted were prepared in full accordance with the operation procedures of the software and:

- ☐ *Subsection 9.36.5. of NBC 2015,*
- ☐ *EnerGuide Rating System v15 w/ variance greater than or equal to 5% above the Reference Model (attach supporting documents)*
- ☐ *Alternative Solution – Specify:* _____ *(attach supporting documents)*

Date		**Signature**	