

Building Permit Application

District of Ucluelet

Planning Department
200 Main Street, Ucluelet, BC
VOR 3A0, PO. Box 999
Tel: 250-726-4770

Type of Permit

- | | |
|--|--|
| <input type="checkbox"/> Single Family Dwelling | <input type="checkbox"/> Occupant Load |
| <input type="checkbox"/> Accessory Building | <input type="checkbox"/> Addition |
| <input type="checkbox"/> Duplex | <input type="checkbox"/> Alteration/Renovation |
| <input type="checkbox"/> Multi-Family Residential, No. of Units ____ | <input type="checkbox"/> Secondary Suite |
| <input type="checkbox"/> Commercial, No. of Units ____ | <input type="checkbox"/> Demolition |
| <input type="checkbox"/> Industrial, No. of Units ____ | <input type="checkbox"/> Excavation |
| <input type="checkbox"/> Public Buildings | <input type="checkbox"/> Occupant Load |
| <input type="checkbox"/> Mobile/Manufactured Home | <input type="checkbox"/> Building Moving |

Description of Property

Civic Address(es): _____ Zoning: _____
Legal Description: Lot _____ Plan _____ Block _____ Section _____ DL _____

Owner Information

Owner name(s): _____
Mailing address: _____ Postal Code: _____
Tel: _____ Cell: _____ Email: _____

Agent Information (Please fill out along with Owners Authorization Form if you are not the owner)

Agent name: _____ Company: _____ Owners Authorization Form attached
Mailing address: _____ Postal Code: _____
Tel: _____ Cell: _____ Email: _____

The undersigned owner/authorized agent of the owner makes an application as specified herein, and declares that the information submitted in support of the application is true and correct in all respects.

Owner or Agent Signature: _____ **Date:** _____

Notice of Disclosure to Applicant(s): The following contact information will be available to the public and may be posted on the Districts' website to allow interested parties to contact you about this application.

Value Of Construction

Value of Construction: _____ Contractor quotes attached

Note: The value of construction for a new Single Family Dwelling is calculated by the Marshall and Swift Residential Estimator.

Office Use Only:

| | | | | |
|---|--|-----------------------|--------------|-------------------|
| Date Received: | | Comments: | | |
| <input type="checkbox"/> Certificate of Title | <input type="checkbox"/> Two sets of Drawings: | DCC Fee if Required | | |
| <input type="checkbox"/> Letter of Authorization | <i>Site Plan, Foundation Plan, Floor Plans,</i> | Water Connection Fee | | |
| <input type="checkbox"/> HPO (New Residential only) | <i>Elevations, Sections, Structural Details,</i> | Sewer Connection Fee | | |
| <input type="checkbox"/> Engineering (If required) | <i>Height/Zoning/Seismic/RSI Calculations</i> | Building permit Fee | | |
| Folio No.: | Permit No.: | Date Received: | Receipt No.: | Total Fee: |
| | BP1 - | | | |
| Planning Reviewed by: | | Building Reviewed by: | | Date Paid: |