

Building Permit Requirements

Septic System

Building Permit Application

The following information is required at submission. Incomplete applications **cannot** be accepted.

1. Completed building permit application consisting of:

- Application form "Permit to Construct or Demolish"
- Schedule 1: Designer Information
- Schedule 2: Sewage System Installer Information Form.
- Completed and signed Applicable Law Checklist
- Completed Statement of Design completed by designer and signed by owner

2. Four sets of plans drawn to scale which must include:

- **Site Plan and Legal Property Survey**

Show the location and dimensions of the existing and proposed buildings, driveways and parking areas. Identify any bodies of water. Identify any wells on the property or neighboring properties and the construction of the wells (I.e. dug well, drilled well with water tight casing etc.) Illustrate all property lines, easements or rights-of-way. A copy of a legal survey must accompany the site plan.

- **Plan and Section drawings**

Septic Plan

- Illustrate the size and location of the septic tank and pump chamber (if required) on the site plan. Illustrate the location of the tile bed, indicating the length, spacing and number of tile runs and the dimensions of the extended contact area (if required). Provide dimensions from the tanks and the tile runs to adjacent buildings, property lines, wells, ponds and water courses.

Section

- Provide a cross section of the leaching bed illustrating the cut of the native soil, width and depth of trenches, filter stacks or filter medium and the slope and elevation of the finished grade.

Calculations

- Provide detailed calculations used for the design of the septic system

3. Four copies of:

- **Site Evaluation** - The owner or authorized agent is responsible for conducting a hydrogeological evaluation of the site and submitting a report which includes the following:
 - A soils analysis which includes soil classification, grain size curves, highest ground water elevation and estimated percolation rates (T-times) of the native soil in minutes per centimeter.

4. Permit fee of \$675.79 applies to our **3 Day Concierge Permit Service**

5. Permit fee of \$563.15 applies to our **Standard 10 Day Permit Application Service**

Permits

Tel. 905-874-2401
Fax 905-874-2499

Inspections

Tel. 905-874-3700
Fax 905-874-3763

Zoning Services

Tel. 905-874-2090
Fax 905-874-2499

Application for a Permit to Construct or Demolish

This form is authorized under subsection 8(1.1) of the *Building Code Act, 1992.*

| For use by Principal Authority | | | |
|--|-------------------------------|--------------------------------|----------|
| Application number: | Permit number (if different): | | |
| Date received: | Roll number: | | |
| Application submitted to: <u>THE CORPORATION OF THE CITY OF BRAMPTON</u> (Name of municipality, upper-tier municipality, board of health or conservation authority) | | | |
| A. Project information | | | |
| Building number, street name | Unit number | Lot/con. | |
| Municipality | Postal code | Plan number/other description | |
| Project value est. \$ | | Area of work (m ²) | |
| B. Purpose of application | | | |
| <input type="checkbox"/> New construction <input type="checkbox"/> Addition to an existing building <input type="checkbox"/> Alteration/repair <input type="checkbox"/> Demolition <input type="checkbox"/> Conditional Permit | | | |
| Proposed use of building | Current use of building | | |
| Description of proposed work | | | |
| C. Applicant Applicant is: <input type="checkbox"/> Owner or <input type="checkbox"/> Authorized agent of owner | | | |
| Last name | First name | Corporation or partnership | |
| Street address | | Unit number | Lot/con. |
| Municipality | Postal code | Province | E-mail |
| Telephone number () | Fax () | Cell number () | |
| D. Owner (if different from applicant) | | | |
| Last name | First name | Corporation or partnership | |
| Street address | | Unit number | Lot/con. |
| Municipality | Postal code | Province | E-mail |
| Telephone number () | Fax () | Cell number () | |

| E. Builder (optional) | | | | |
|---|--|------------------------|--|-----------------------------|
| Last name | | First name | Corporation or partnership (if applicable) | |
| Street address | | | Unit number | Lot/con. |
| Municipality | | Postal code | Province | E-mail |
| Telephone number () | | Fax () | | Cell number () |
| F. Tarion Warranty Corporation (Ontario New Home Warranty Program) | | | | |
| i. Is proposed construction for a new home as defined in the <i>Ontario New Home Warranties Plan Act</i> ? If no, go to section G. | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ii. Is registration required under the <i>Ontario New Home Warranties Plan Act</i> ? | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| iii. If yes to (ii) provide registration number(s): _____ | | | | |
| G. Required Schedules | | | | |
| i) Attach Schedule 1 for each individual who reviews and takes responsibility for design activities. | | | | |
| ii) Attach Schedule 2 where application is to construct on-site, install or repair a sewage system. | | | | |
| H. Completeness and compliance with applicable law | | | | |
| i) This application meets all the requirements of clauses 1.3.1.3 (5) (a) to (d) of Division C of the Building Code (the application is made in the correct form and by the owner or authorized agent, all applicable fields have been completed on the application and required schedules, and all required schedules are submitted). Payment has been made of all fees that are required, under the applicable by-law, resolution or regulation made under clause 7(1)(c) of the <i>Building Code Act, 1992</i> , to be paid when the application is made. | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ii) This application is accompanied by the plans and specifications prescribed by the applicable by-law, resolution or regulation made under clause 7(1)(b) of the <i>Building Code Act, 1992</i> . | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| iii) This application is accompanied by the information and documents prescribed by the applicable by-law, resolution or regulation made under clause 7(1)(b) of the <i>Building Code Act, 1992</i> which enable the chief building official to determine whether the proposed building, construction or demolition will contravene any applicable law. | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| iv) The proposed building, construction or demolition will not contravene any applicable law. | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I. Declaration of applicant | | | | |
| I _____ declare that: | | | | |
| (print name) | | | | |
| 1. The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge. | | | | |
| 2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership. | | | | |
| _____ | | _____ | | |
| Date | | Signature of applicant | | |

Personal information contained in this form and schedules is collected under the authority of subsection 8(1.1) of the *Building Code Act, 1992*, and will be used in the administration and enforcement of the *Building Code Act, 1992*. Questions about the collection of personal information may be addressed to: a) the Chief Building Official of the municipality or upper-tier municipality to which this application is being made, or, b) the inspector having the powers and duties of a chief building official in relation to sewage systems or plumbing for an upper-tier municipality, board of health or conservation authority to whom this application is made, or, c) Director, Building and Development Branch, Ministry of Municipal Affairs and Housing 777 Bay St., 2nd Floor. Toronto, M5G 2E5 (416) 585-6666.

Schedule 1: Designer Information

Use one form for each individual who reviews and takes responsibility for design activities with respect to the project.

| A. Project Information | | | |
|---|--|---|----------|
| Building number, street name | | Unit no. | Lot/con. |
| Municipality | Postal code | Plan number/ other description | |
| B. Individual who reviews and takes responsibility for design activities | | | |
| Name | | Firm | |
| Street address | | Unit no. | Lot/con. |
| Municipality | Postal code | Province | E-mail |
| Telephone number () | Fax number () | Cell number () | |
| C. Design activities undertaken by individual identified in Section B. [Building Code Table 3.5.2.1. of Division C] | | | |
| <input type="checkbox"/> House | <input type="checkbox"/> HVAC – House | <input type="checkbox"/> Building Structural | |
| <input type="checkbox"/> Small Buildings | <input type="checkbox"/> Building Services | <input type="checkbox"/> Plumbing – House | |
| <input type="checkbox"/> Large Buildings | <input type="checkbox"/> Detection, Lighting and Power | <input type="checkbox"/> Plumbing – All Buildings | |
| <input type="checkbox"/> Complex Buildings | <input type="checkbox"/> Fire Protection | <input type="checkbox"/> On-site Sewage Systems | |
| Description of designer's work | | | |
| D. Declaration of Designer | | | |
| I _____ declare that (choose one as appropriate): | | | |
| (print name) | | | |
| <input type="checkbox"/> I review and take responsibility for the design work on behalf of a firm registered under subsection 3.2.4. of Division C, of the Building Code. I am qualified, and the firm is registered, in the appropriate classes/categories. Individual BCIN: _____ Firm BCIN: _____ | | | |
| <input type="checkbox"/> I review and take responsibility for the design and am qualified in the appropriate category as an "other designer" under subsection 3.2.5. of Division C, of the Building Code. Individual BCIN: _____ Basis for exemption from registration: _____ | | | |
| <input type="checkbox"/> The design work is exempt from the registration and qualification requirements of the Building Code. Basis for exemption from registration and qualification: _____ | | | |
| I certify that: | | | |
| 1. The information contained in this schedule is true to the best of my knowledge. 2. I have submitted this application with the knowledge and consent of the firm. | | | |
| _____ | | _____ | |
| Date | | Signature of Designer | |

NOTE:

1. For the purposes of this form, "individual" means the "person" referred to in Clause 3.2.4.7(1) (c) of Division C, Article 3.2.5.1. of Division C, and all other persons who are exempt from qualification under Subsections 3.2.4. and 3.2.5. of Division C.
2. Schedule 1 is not required to be completed by a holder of a license, temporary license, or a certificate of practice, issued by the Ontario Association of Architects. Schedule 1 is also not required to be completed by a holder of a license to practise, a limited license to practise, or a certificate of authorization, issued by the Association of Professional Engineers of Ontario.

CITY OF BRAMPTON - BUILDING DIVISION

SECTION G*í*. DOCUMENTS ESTABLISHING COMPLIANCE WITH APPLICABLE LAW (OBC Div. A - 1.4.1.3.)

| | |
|-------------------------------------|---|
| Permit Application No. _____ | Project Location # _____ street _____ unit/suite _____ |
|-------------------------------------|---|

Explanation:

Applicable Law - Applicable law is other regulations for which approval must be obtained before a building permit can issue. A complete list of Acts and Regulations that are "Applicable Law" is set out in Article 1.4.1.3 of Division A of the Ontario Building Code.

Instructions:

The most common Acts and Regulations are listed below with the documentation that must be provided before a building permit can issue. Check those that apply to your permit application and complete the declaration. The customer service plans examiner will assist you with any questions you may have about the regulations listed. The documents noted must be provided before a building permit can issue.

Details and Contact Information

A list of agencies and contact information is available at the Building Division or on the City of Brampton website

APPLICABLE LAWS (Note: This list provides only the most common approvals)

| ACT | Description | REQUIRED DOCUMENTS (Provide copy) | Required Yes/No | Received |
|---|---|--|--------------------|----------|
| Planning Act s.41 | (Site Plan Control) | Site plan approved drawings | | |
| Planning Act s.34 | (Zoning By-law) | Final & binding amendment | | |
| Planning Act Pt. V1 | (Division of Land) | Registered Plan or Deed | | |
| Planning Act s.45 | (Minor Variance) | Final Decision from City Clerk | | |
| Planning Act s.33 | (Demolition of Residential Property) | Council Approval | | |
| Ontario Heritage Act ss.27 (3), 30(2), 33, ss.34.40.1 & 40.2 | | Heritage Permit | | |
| Ontario Heritage Act s.34.5 and s. 34.7.(2) | | Ministry of Culture approval | | |
| Development Charges Act s.28 and s.53, Education Act s.257.83 & 257.93 | (Financial Contribution) | Confirmation of payment from City of Brampton Finance Department | | |
| Planning Act s.42(6) | (Cash in Lieu of Parkland) | Confirmation of payment from City of Brampton Finance Department | | |
| Conservation Authorities Act | (Flood plain or fill regulated area) | Construction and Fill Permit | | |
| Child Care & Early Years Act, 2014, S.). 2014, c.11 Sched. 1,0. Reg. 137/15 s.13 & 25 | (Daycare centre with more than 5 children) | Approval from Ministry of Children and Youth Services | | |
| Education Act s.194 | (Demolition of all or part of a school) | Approval from Ministry of Education | | |
| Environmental Protection Act s.168.3.1 & 168.6(1) change of use of land | (Industrial or commercial to agricultural, residential or park) | File Record of Site Condition (RSC) and/or provide Certification of Property use (CPU) | | |
| Public Transportation Act s.34 and s. 38 10 | (Construction within 45m of the road or within 395m of an intersection of Hwys, 410 or 407) | Building and Land Use Permit issued by MTO | | |
| Other: | | | | |
| | | | | |
| | | | | |
| | | | | |

APPLICANT'S DECLARATION

I, _____ (print name) certify that the applicable laws designated on the above noted chart are, to the best of my knowledge, all of the "applicable law" for which this application for a permit must comply before a permit is issued.

_____ Date

_____ Signature

FOR OFFICE USE ONLY



STATEMENT OF DESIGN For The Installation of Class 2 to 5 Sewage Systems

Note: This Statement of Design must accompany all building permit applications where a new or an alteration to an existing Class 2 to Class 5 private sewage system is proposed.

| PROJECT INFORMATION | SYSTEM DETAILS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|--------------------------|--------------------------|---------------|-------|--------------------|----------------|-------|-------------------|--------------------|-------|-------------------|--------------------|-------|--------------------|-------------|-------|-------------------|-----------------|-------|--------------------|-------------|-------|--------------------|-------|-------|-----------------------|-------|-------|-----------------------|-------|-------|-----------------------|--|
| Permit Application No. _____ Project Address: _____ Type of Work <input type="checkbox"/> Construct New <input type="checkbox"/> Alter Existing <input type="checkbox"/> Remove / Demolish Existing <input type="checkbox"/> Repair Existing Occupancy(ies) Served: <input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential If non-residential, specify uses _____ | <input type="checkbox"/> Class 2 <input type="checkbox"/> Class 3 <input type="checkbox"/> Class 4 Filter Bed Base Contact Area _____ Area of filter medium _____ # Runs of tile _____ <input type="checkbox"/> Header OR <input type="checkbox"/> Distribution Box Tank <input type="checkbox"/> Use existing <input type="checkbox"/> New - Size (L) _____ <input type="checkbox"/> Concrete <input type="checkbox"/> Polyethylene | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESIGNER INFORMATION | <input type="checkbox"/> Class 4 Raised Filter Bed Base Contact Area _____ Area of filter medium _____ # Runs of tile _____ <input type="checkbox"/> Header OR <input type="checkbox"/> Distribution Box Tank <input type="checkbox"/> Use existing <input type="checkbox"/> New - Size (L) _____ <input type="checkbox"/> Concrete <input type="checkbox"/> Polyethylene | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SITE EVALUATION | <input type="checkbox"/> Class 4 Trench Bed <input type="checkbox"/> Dug into existing soil OR <input type="checkbox"/> Imported Soil If imported soil, provide (T) time _____ If imported soil, provide contact area _____ Total length of tile _____ # Runs of tile _____ <input type="checkbox"/> Header OR <input type="checkbox"/> Distribution Box Tank <input type="checkbox"/> Use existing <input type="checkbox"/> New - Size (L) _____ <input type="checkbox"/> Concrete <input type="checkbox"/> Polyethylene | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name: _____ Company and Address: _____ Telephone: (____) _____ Fax: (____) _____ Individual BCIN: _____ Firm BCIN: _____ | <input type="checkbox"/> Class 4 (other- including BMEC authorized system) <input type="checkbox"/> BMEC Authorization Attached Manufacturer & model _____ Daily Capacity (L) _____ Other details _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESIGN DATA | <input type="checkbox"/> Class 5 (Holding tank- Pump out contract must be provided) Size (L) _____ <input type="checkbox"/> Conc <input type="checkbox"/> Polyethylene <input type="checkbox"/> Other _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Native Soil Percolation Rate: _____ min/cm <input type="checkbox"/> Assumed (worst case) <input type="checkbox"/> Actual Soil grains analysis report? <input type="checkbox"/> YES, attached <input type="checkbox"/> NO Percolation Test Date: _____ Wells: <input type="checkbox"/> Dug or Bored <input type="checkbox"/> Drilled (watertight casing to 6m min.) <input type="checkbox"/> No Wells Within 30m <input type="checkbox"/> Municipal Water Service Site Evaluation Performed By: Name: _____ Address: _____ Telephone: (____) _____ | Is a Sewage Pump required? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Capacity (L) _____ Horsepower _____ Head _____ Run _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OWNER'S AUTHORIZATION | The owner is responsible for conducting a site evaluation and for designing an on-site sewage system that will perform its intended function. Neither the granting of a permit, nor the approval of plans, nor inspections made by the building official shall in any way exempt the owner(s) from complying with the Ontario Building Code or any other applicable law. I, (print name) _____ the owner of the subject property, hereby authorize the above mentioned installer to act on my behalf with respect to all matters pertaining to the proposed on-site sewage system. Signature: _____ Telephone: (____) _____ Date: _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Design Flow Rate (L): _____ Occupant Load: _____ Total Finished Floor Area (Above Grade) _____ Total # of bedrooms _____ <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Description</th> <th style="text-align: center;"># Existing</th> <th style="text-align: center;">#Total X #FU = Total #FU</th> </tr> </thead> <tbody> <tr> <td>Kitchen Sinks</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____ X 1½ = _____</td> </tr> <tr> <td>Bathroom Group</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____ X 6 = _____</td> </tr> <tr> <td>Flush Tank Toilets</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____ X 4 = _____</td> </tr> <tr> <td>Showers & Bathtubs</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____ X 1½ = _____</td> </tr> <tr> <td>Wash Basins</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____ X 1 = _____</td> </tr> <tr> <td>Clothes Washers</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____ X 1½ = _____</td> </tr> <tr> <td>Laundry Tub</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____ X 1½ = _____</td> </tr> <tr> <td>Other</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____ X _____ = _____</td> </tr> <tr> <td>Other</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____ X _____ = _____</td> </tr> <tr> <td>Other</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____ X _____ = _____</td> </tr> </tbody> </table> | Description | # Existing | #Total X #FU = Total #FU | Kitchen Sinks | _____ | _____ X 1½ = _____ | Bathroom Group | _____ | _____ X 6 = _____ | Flush Tank Toilets | _____ | _____ X 4 = _____ | Showers & Bathtubs | _____ | _____ X 1½ = _____ | Wash Basins | _____ | _____ X 1 = _____ | Clothes Washers | _____ | _____ X 1½ = _____ | Laundry Tub | _____ | _____ X 1½ = _____ | Other | _____ | _____ X _____ = _____ | Other | _____ | _____ X _____ = _____ | Other | _____ | _____ X _____ = _____ | |
| Description | # Existing | #Total X #FU = Total #FU | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Kitchen Sinks | _____ | _____ X 1½ = _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bathroom Group | _____ | _____ X 6 = _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Flush Tank Toilets | _____ | _____ X 4 = _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Showers & Bathtubs | _____ | _____ X 1½ = _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Wash Basins | _____ | _____ X 1 = _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Clothes Washers | _____ | _____ X 1½ = _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Laundry Tub | _____ | _____ X 1½ = _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other | _____ | _____ X _____ = _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other | _____ | _____ X _____ = _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other | _____ | _____ X _____ = _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |