

Garages and Sheds

Building Permit Information Guide

Building Division 18 Manitou Crescent West Amherstview, ON

Mail To: P.O. Box 70 263 Main St. Odessa, ON KOH 2HO

613-386-7351 | www.loyalist.ca

Office Hours

September through April Mon – Fri 8:30 am – 4:30 pm

May through August Mon – Thu 8:15 am -4:30 pm Fri 8:15 am – 12:15 pm

Revised December 2022

Building Permit Information Guide for Garages and Sheds

Permit Requirements

- In general, a building permit is not required for a structure less than 10m² that does not contain plumbing.
- A building permit is not required for a shed less than 15m² that does not contain plumbing.
- All structures must comply with the Township's Zoning By-law.

How to Apply

- Conveniently apply online. The Township's new web portal is now online. Apply for permits, check the status of applications and inspections, and estimate permit fees - all from the comfort of home. www.cityviewcanada.harriscomputer.com/loyalistportal
- Apply in person at 18 Manitou Cr. W., Amherstview. Office hours are September through April Monday to Friday, 8:30 am to 4:30 pm and May through August Monday to Thursday, 8:15 am to 4:30 pm, Friday 8:15 am to 12:15 pm.

Required Information

Please see the next page for a comprehensive list of required items. Providing a complete application submission allows for timely reviews and approvals.

What's Next?

Complete applications will be reviewed within 10 business days. A building inspector will contact the applicant once the review is complete. A correction notice will be issued if any deficiencies are noted. Permit fees are payable upon application approval.

If an application is deemed incomplete, applicants will be notified via email. The application will be placed on hold until all outstanding items are received. Applications that remain inactive for 90 days may be cancelled.

Fee Payments

A \$100 non-refundable deposit is collected when the permit is applied for. All other fees will be calculated during the review process and collected upon application approval. Fees are payable by cheque or debit at the Amherstview office.

How Long is a Permit Valid For?

Building permits are valid for one year from the date of issuance.

Questions

If you have any questions about the permit application process, please don't hesitate to contact Ashley MacPherson, Development Analyst, at 613-386-7351, ext. 128, or amacpherson@loylist.ca.

Commitment to Accessibility

If you are a person with a disability and need Loyalist Township information in another format, please contact 613-386-7351, extension 100, during office hours or email info@loyalist.ca.

Building Permit Application Checklist for Garages and Sheds

Items required for a complete building permit application submission:

| ☐ Building permit application form |
|---|
| Schedule 1: Designer Information form |
| \$100 Deposit (payable by cheque or debit at 18 Manitou Cr. W., Amherstview) |
| Copy of Deed/Land Transfer (copies may be obtained online at www.onland.ca) |
| Agent Authorization form (required if the property owner is not submitting the application) |
| Approvals from other agencies as required |
| ☐ Township Entrance Permit for projects with a construction value greater than \$10,000 |
| Site plan indicating the following: Property address Dimensions and area of the property Area of all existing structures on the property Dimensions of proposed garage/shed Distance from garage/shed to all property lines, easements, right-of-ways, and othe structures Location of septic system and distance from garage/shed (if applicable) Location of water and sewer lines (if applicable) |
| Site plans may be hand drawn but must be clear and drawn to scale. |
| Design drawings drawn to scale (min 1/8" = 1') upon substantial material and electronic forma (PDF). Drawings shall consist of fully dimensioned plan view, cross-section view and elevations |
| ☐ Truss layout from manufacturer or roof details if hand-framing |
| Drawings stamped by an Ontario Professional Engineer for structural slabs greater than 55m ² |
| ☐ Drawings stamped by an Ontario Professional Engineer for prefabricated buildings |



Application for a Permit to Construct or Demolish This form is authorized under subsection 8(1.1) of the Building Code Act, 1992

NOTE: A copy of the deed to your property is required prior to permit issuance.

| For use by Principal Authority | | | | | | | |
|---|---------------------|------------|----------------|--------------------------------|-----------|--------------------|-----------------------|
| Application number: Perr | | | Permit n | Permit number (if different): | | | |
| Date received: Roll nu | | | Roll nun | number: | | | |
| Application submitted to:(Name of municipal | ity, upper-tie | er municip | pality, bo | ard of health or cor | nservatio | n 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 | | | | | | | |
| New construction Addition to existing by | | | Altera | tion/repair | [| Demolition | Conditional Permit |
| Proposed use of building | | | | building | | | |
| Description of proposed work | | | | | | | |
| C. Applicant Applicant is: | Owner or | | | Authorized agent of owner | | | |
| Last name | First name Corporat | | Corporation or | r 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 nar | me | | Corporation or | partners | ship | |
| Street address | <u>. I</u> | | | | | Unit number | Lot/con. |
| Municipality | Postal code | | | Province | | E-mail | |
| Telephone number () | Fax () | | | | | Cell number () | |

| E. Builder (optional) | | | | |
|--|----------------------------|---------------------------------|----------------------|-------------|
| Last name | First name | Corporation or partnersh | nip (if applicable) | |
| | | | | |
| Street address | | | Unit number | Lot/con. |
| Municipality | Postal code | Province | E-mail | L |
| Municipality | Postal code | Flovince | E-IIIali | |
| Telephone number | Fax | | Cell number | |
| () | () | | () | |
| F. Tarion Warranty Corporation (Ontario | New Home Warra | nty Program) | | |
| i. Is proposed construction for a new hom Plan Act? If no, go to section G. | e as defined in the On | tario New Home Warranties | Ye | es No |
| ii. Is registration required under the Ontari | o New Home Warranti | es Plan Act? | Ye | es No |
| | | | L | |
| iii. If yes to (ii) provide registration number | (s): | | | |
| G. Required Schedules | | | | |
| i) Attach Schedule 1 for each individual who rev | iews and takes respon | sibility for design activities. | | |
| ii) Attach Schedule 2 where application is to cons | struct on-site, install or | repair a sewage system. | | |
| H. Completeness and compliance with a | applicable law | | | |
| i) This application meets all the requirements of | | | Ye | es No |
| Building Code (the application is made in the | | | | |
| applicable fields have been completed on the schedules are submitted). | application and requir | ed schedules, and all requir | ed | |
| Payment has been made of all fees that are re | | | Ye | es No |
| regulation made under clause 7(1)(c) of the E application is made. | uilding Code Act, 1992 | 2, to be paid when the | | 70 |
| | | | | es No |
| resolution or regulation made under clause 7(| (1)(b) of the Building C | ode Act, 1992. | | ,, |
| iii) This application is accompanied by the information and documents prescribed by the applicable by- | | | | es No |
| 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. | | | | |
| iv) The proposed building, construction or demol | tion will not contraven | e any applicable law. | Ye | es No |
| I. Declaration of applicant | | | | |
| | | | | |
| | | | | |
| (print name) | | | ded | clare that: |
| (pink name) | | | | |
| 1. The information contained in this application | | lles, attached plans and spe | cifications, and oth | er 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. | | | | |
| 2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership. | | | | |
| Dete | 0: | .f. a.m. lianut | | _ |
| Date | Signature o | or 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 C1 House HVAC - House **Building Structural** Plumbing - House **Small Buildings Building Services** Large Buildings Detection, Lighting and Power Plumbing - All Buildings Complex Buildings Fire Protection On-site Sewage Systems Description of designer's work D. Declaration of Designer declare that (choose one as appropriate): (print name) 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: 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: 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.

NOTE:

Date

- 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.
- 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.

Signature of Designer

Agent of Record Letter



Please complete in full if: the owner is not the applicant, or the owners wish to have an agent speak on their behalf.

If there are multiple owners, please have an Authorization letter from each owner.

| If an agent is representing the owner(s), they must complete the following: | | | | | |
|---|----------------------|----------------------------|--|--|--|
| I, (we) | I, (we) being the | | | | |
| registered owner(s) of the pr | operty. | | | | |
| Hereby authorize | | to prepare, submit and | | | |
| obtain a building permit, on i | my behalf, for the p | oroject at | | | |
| Please check appropriate | box: | | | | |
| ☐ Construct | ☐ Install | ☐ Alter/ Repair ☐ Renovate | | | |
| Describe work: | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Print Name of Owner | | Print Name of Agent | | | |
| | | | | | |
| | | | | | |
| Signature of Owner | | Signature of Agent | | | |
| | | | | | |
| | | | | | |

The Corporation of Loyalist Township P.O. Box 70, 263 Main Street, Odessa, Ontario K0H 2H0



Tel: 613-386-7351 Fax: 613-386-3833 Email: info@loyalist.ca www.loyalist.ca

ENTRANCE PERMIT / DAMAGE DEPOSIT APPLICATION FORM

| NAME: | DATE: | | | | | |
|--|--|--|--|--|--|--|
| CURRENT ADDRESS: | | | | | | |
| | BLDG. PERMIT #: | | | | | |
| | R-PLAN #: | | | | | |
| APPLICATION ADDRESS: | | | | | | |
| | CONCESSION #: | | | | | |
| ENTRANCE APPLICATION | I / DAMAGE DEPOSIT : (Check appropriate selection) | | | | | |
| New Entrance Permit (for but Culvert Repair/Replacement Entrance Widening Access for Pool Installation Building construction in excessing Paving Resurfacing **For all new Driveway/Entrance Ap | t The state of the | | | | | |
| ADDITIONAL E EEES, /co.m. | | | | | | |
| APPLICABLE FEES: (as pe | er municipal by-law prescribing miscellaneous fees) | | | | | |
| All applications: must inclu | ide a <mark>\$50.00</mark> inspection fee (non-refundable) | | | | | |
| | ermit: \$100 application fee (non-refundable) | | | | | |
| - | | | | | | |
| On approval of application | 1: \$2,500. Refundable Damage Deposit required prior to commencement of work (for Road/Right-of-Way only, does not | | | | | |
| | permit for any crossing or use of any other public lands or public places) | | | | | |
| Culvert Installation Cost: | | | | | | |
| (Size and Length of culvert to be de | termined by the Township, as per each install) | | | | | |
| | | | | | | |
| Applicant signature | Date | | | | | |
| TOWNSHIP USE ONLY | | | | | | |
| | Permit, the owner/applicant agrees that the work will be carried out e Ontario Health & Safety Act, Ontario Traffic Manual and Township | | | | | |
| Policy & Procedures | o charlo ricalar a carety Act, charlo riamo manda and remising | | | | | |
| Inopostion Forth | Entrance Permit Approved By: | | | | | |
| Inspection Fee** New Entrance Application | \$ 50.00 \$ 100.00 Culvert Required: <u>L Dia.</u> | | | | | |
| Culvert Fee ** | \$ 100.00 Culvert Required: L Dia. \$. . Date of Inspection: | | | | | |
| Damage Deposit *** | \$. Date of Inspection: | | | | | |
| Total Fee | \$. | | | | | |
| **Application & culvert fee (1-4-310-0148) | ***Damage deposit: (1-2-023-9711) | | | | | |
| | py of this form and payment receipt to GL Clerk. | | | | | |

DAMAGE DEPOSIT

| PRE-CONSTRUCTION IN | SPECTION: | | (Pictures to | be saved on file) – |
|-------------------------------|-------------|--|--------------|----------------------|
| Inspection By: | | P:\01-Public Works\Entrance Permit & Damage Deposit Applications | | |
| Date of Inspection: | | | | |
| Comments: | | | | |
| | | | | |
| | | | | |
| | | | | |
| Damage Deposit Require | ed: Y: N: 🗆 | Date of Deposit | Ar | mount \$ |
| | | | | |
| Signature | | Date | | |
| | | | | |
| POST-CONSTRUCTION I | NSPECTION | <u>:</u> | (Pictures to | be saved on file) - |
| Inspection By: | | P:\01-Public Works\Entrance Permit & Damage Deposit Applications | | |
| Date of Final Inspection | | | | |
| Comments: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| DAMAGE DEPOSIT RELE | EASE: | Amount \$ | Releas | se from 1.2.021.9711 |
| Comments: | | | | 30 H3H H2H32 H3T FT |
| Comments. | | | | |
| | | | | |
| Signature of Inspector | Date | Signature of Supe | ervisor | Date |
| | | | | |
| Signature of Manager | Date | Signature of Depu | uty | Date |
| Copy to GL Clerk | | Treasurer | | |
| — 55, 15 52 515.11 | | | | |

ADDITIONAL DETAILS: