



13211 Henry Avenue
 Box 159
 Summerland, BC Canada V0H 1Z0
 Phone: (250) 494-6451
 Fax: (250) 494-1415

Building Permit Application

PROPERTY ADDRESS: _____
 LEGAL DESCRIPTION: Lot _____; DL _____; Plan _____
 CURRENT ZONING: _____ Roll # _____

PROPERTY OWNER	CONTRACTOR
Name: _____	Name: _____
Address: _____	Address: _____
City: _____	City: _____
Postal Code: _____	Postal Code: _____
Phone: _____ Fax: _____	Phone _____ Fax: _____
Email: _____	Email: _____

Type of Construction:	OFFICE USE ONLY	
<input type="checkbox"/> Renovation	Value of Construction \$ _____	Permit Fee _____
<input type="checkbox"/> Addition	Total Floor Area _____	D.C.C. Fee _____
<input type="checkbox"/> New	Refundable Security _____	Water Meter _____
	Total Amount Due _____	Document Fees _____

APPLICATION MUST INCLUDE:		SCHEDULE OF FEES
<input type="checkbox"/> TWO sets of the following:	<input type="checkbox"/> <i>Current</i> Title Search	(Non-Engineered): \$100.00 for the first \$1,000 of building costs. Plus \$10.00 per thousand thereafter.
<input type="checkbox"/> Site plan	<input type="checkbox"/> Letter of authorization if other than the owner	(Engineered): \$100.00 for the first \$1,000 of building costs. Plus \$9.00 per thousand thereafter.
<input type="checkbox"/> Driveway plan	<input type="checkbox"/> H.P.O. Forms	Minimum Building Permit Fee \$100 Refundable Security \$500
<input type="checkbox"/> Floor plan	<input type="checkbox"/> Septic field permit -Interior Health (if applicable)	
<input type="checkbox"/> Elevations		
<input type="checkbox"/> Cross sections		
<input type="checkbox"/> Floor & truss layouts		
<input type="checkbox"/> Lot grading plans Existing & Proposed		

Drawings may be submitted electronically in Adobe pdf format along with the 2 paper copies. Professionally drafted plans are preferred.

The personal information on this form is collected under the authority of the Local Government Act/Community Charter for the purposes of processing this application, and is subject to the Freedom of Information and Protection of Privacy Act. Any questions regarding this collection should be directed to the Corporate Officer, District of Summerland, Box 159, Summerland BC (250) 404-4057.

SIGNATURE OF REGISTERED OWNERS _____ _____ DATE: _____	OFFICE USE ONLY
	Date received: _____
	Received by: _____
	Comments: _____ _____ _____