



# Application for a Permit to Demolish

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

For use by Principal Authority			
Application number:		Permit number (if different):	
Date received:		Roll number:	
Application submitted to: _____ (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 <sup>2</sup> )	
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	City/Town/Village	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	City/Town/Village	Province	E-mail
Telephone number ( )	Fax ( )	Cell number ( )	

<b>E. Builder (optional)</b>			
Last name		First name	Corporation or partnership (if applicable)
Street address			Unit number Lot/con.
Municipality		Postal Code	Province
Telephone number ( )		Fax ( )	E-mail
<b>F. Tarion Warranty Corporation (Ontario New Home Warranty Program)</b>			
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): _____			
<b>G. Required Schedules</b>			
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.			
<b>H. Completeness and compliance with applicable law</b>			
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
<b>I. Declaration of applicant</b>			
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.

**DEMOLITION INFORMATION**

**ADDRESS:** \_\_\_\_\_

**TYPE OF BUILDING TO BE DEMOLISHED:** \_\_\_\_\_

**SIZE OF BUILDING:** \_\_\_\_\_ **ESTIMATED COST:** \_\_\_\_\_

The applicant is to contact each of the following companies and have a representative sign below **PRIOR TO APPLICATION:**

**\*NOTE: Service disconnections may be required to be completed by utility companies in order to obtain signatures\***

<b>Union Gas</b> Colleen McIlmoyle 1-855-228-4898 ext. 5111130 <a href="mailto:sarnplan@uniongas.com">sarnplan@uniongas.com</a>	
<b>Bluewater Power (For Water)</b> Brenda Larsen 855 Confederation Street 519-337-8201 ext. 2214 <a href="mailto:blarsen@bluewaterpower.com">blarsen@bluewaterpower.com</a>	
<b>Bluewater Power (For Hydro)</b> Mark Janjatovic 855 Confederation Street 519-337-8201 ext. 2215 <a href="mailto:mjanjatovic@bluewaterpower.com">mjanjatovic@bluewaterpower.com</a>	
<b>Bell Canada</b> Georgina McCaw 519-383-8298 <a href="mailto:georgina.mccaw@bell.ca">georgina.mccaw@bell.ca</a>	
<b>Sarnia Fire Department</b> 240 East Street 519-332-1122 <a href="mailto:firerescue@sarnia.ca">firerescue@sarnia.ca</a>	
<b>Tax Department</b> City Hall 1 <sup>st</sup> Floor 519-332-0330 ext. 3338 <a href="mailto:taxes@sarnia.ca">taxes@sarnia.ca</a>	
<b>Engineering Department</b> City Hall 3 <sup>rd</sup> Floor 519-332-0330 ext. 3376 <a href="mailto:engineering@sarnia.ca">engineering@sarnia.ca</a>	

The following signatures will be obtained internally once the application is submitted:

<b>Planning Department</b> City Hall 3 <sup>rd</sup> Floor 519-332-0330 ext. 3303 <a href="mailto:planning@sarnia.ca">planning@sarnia.ca</a>	
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It is expressly understood and agreed that the issuing of a permit does not relieve the Owner or Agent from complying with all said laws and regulations although not called for in the specifications or shown on plans submitted. The Owner or Agent further agrees that if the permit issued is revoked for any irregularity of non-conformity with the said laws or regulations or variation from the plans and specifications submitted herewith, the Owner or Agent shall have no claim or cause of action against the City for same, or the results thereof, including, without limiting the generality of the foregoing, the necessity of repairing, demolishing or taking any other steps in relation to the property of the work done thereon. The Owner or Agent further agrees, at all times, to indemnify the Corporation from any and all claims for damages to persons or properties, including costs of repairs to or replacement of sidewalks, trees, curbs, gutters or lawns arising out of any or all acts or work being done in connection with the work outlined herein.

I certify that I have knowledge of the particulars contained in this application and they are fully and truly stated to the best of my knowledge and belief. I certify that I have authority to sign this Application and this said Application is executed in a manner binding upon the Owner.

This application shall be read with all changes of gender or number required by the context.

**Date:** \_\_\_\_\_ **Owner or Agent:** \_\_\_\_\_

- Note (1) Trees and sidewalks are considered to be in good condition unless shown to be otherwise by applicant.
- Note (2) All demolition work is to be carried out in a safe and workmanlike manner and in accordance with the requirements prescribed in the current regulations under the Occupational Health and Safety Act.
- Note (3) The site shall be raked clean and no debris of combustible or non-combustible nature shall be left on the premises.
- Note (4) Where the following conditions occur the applicant shall ensure that a professional engineer is responsible for field review of the demolition project; where the structure includes pre-tensioned or post-tensioned members; where it is proposed that the demolition will extend below the level of the footings of any adjacent building and occur within the angle of repose of the soil drawn from the bottom of such footings; where explosives or a laser are to be used during the course of demolition.
- Note (5) Sign off by the City or other Authorities having jurisdiction does not relieve the applicant or his agent from obtaining service locates prior to commencing work on site

**CALL FOR SERVICE LOCATIONS PRIOR TO STARTING @ 1-800-400-2255**



**THE CORPORATION OF THE CITY OF SARNIA**

**City Solicitor/Clerk's Department**

255 Christina Street N. PO Box 3018

Sarnia ON Canada N7T 7N2

519 332-0330 519 332-3995 (fax)

519 332-2664 (TTY)

[www.sarnia.ca](http://www.sarnia.ca) [clerks@sarnia.ca](mailto:clerks@sarnia.ca)

**357 Assessment Reduction Application**

Dear Sir/Madam:

This is to advise you, that as you are applying for a demolition permit, the property owned by you may be entitled to an adjustment in Municipal Taxes under Section 357 of the Municipal Act.

If you wish to pursue this matter further, and would like to be sent a 357 Assessment Reduction Application form, would you please contact me at the Finance Department, 332-0330, Ext. 350, if you have any questions.

Sincerely,

A handwritten signature in black ink that reads "Carol Barr". The signature is written in a cursive style with a large, looping initial 'C'.

Carol Barr  
Licensing Clerk

/cb



## **THE CORPORATION OF THE CITY OF SARNIA**

Planning and Building Department  
255 Christina Street N. PO Box 3018  
Sarnia ON Canada N7T 7N2  
519 332-0330 519 332-0776 (fax)  
519 332-2664 (TTY)  
[www.sarnia.ca](http://www.sarnia.ca) [building@sarnia.ca](mailto:building@sarnia.ca)

### **ASBESTOS AND DEMOLITION/RENOVATION WORK**

Before starting work on a demolition or renovation job, the owner of the structure must complete a report indicating whether any asbestos-containing material is likely to be handled, dealt with or disturbed, or removed. This report must include drawings, plans, and specifications as appropriate. If you're doing a demolition or renovation project and you haven't received this Owner's Report, ask for it. Depending on the type of asbestos present, a certified asbestos removal worker may be required to do the job.

Go to [www.csao.org/images/pfiles/328\\_DS037.pdf](http://www.csao.org/images/pfiles/328_DS037.pdf) to download "Asbestos Controls for Construction, Demolition, and Renovation". This handbook will tell you what you need to know about asbestos and how to protect yourself and your workers.

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Construction Safety Association of Ontario  
21 Voyager Court South  
Etobicoke, Ontario M9W 5M7 Canada  
[Tel:1-800-781-2726](tel:1-800-781-2726)  
Fax: 1-416-674-8866  
[www.csao.org](http://www.csao.org)