Residential **Development Permit** Checklist

To ensure your application is reviewed in a timely manner, please find your project type from the options below for a list of additional submittal requirements. Please ensure all materials submitted are clear and legible.

If you are applying for a commercial, industrial, institutional or multi-unit (>4 units) residential development, please refer to the Non-Residential Development Permit Application Package.

REQUIRED FOR ALL DEVELOPMENT PERMIT APPLICATIONS							
√	Required Submittal						
	Completed Application Form						
	Application Fee						
	Applicant and Registered Owner signatures on the Application Form						
	or						
	Signature of Applicant and a Letter of Authorization from the Registered Owner						

ADDITIONAL SUBMITTALS BY PROJECT TYPE									
Αſ	ODITION (INCLUDING COVERED DECK)	SECONDARY SUITE							
√	Required Submittal	√	Required Submittal						
	Site Plan (a Real Property Report can be used) indicating proposed location, size		Site Plan (a Real Property Report can be used) indicating location and stall size of						
	and setbacks to property lines and other buildings on site		available parking on site						
	Drawings of proposed addition		Floor Plan of proposed suite indicating room dimensions and uses, and location of doors and windows						
	UNCOVERED DECK	ACCESSORY BUILDING (SHED, GARAGE, GAZEBO, ETC.)							
✓	Required Submittal	>	Required Submittal						
	Site Plan (a Real Property Report can be		Site Plan (a Real Property Report can be						
	used) indicating proposed location, size		used) indicating proposed location, size						
	and setbacks to property lines		and setbacks to property lines and other buildings on site						
	HOME BUSINESS		Accessory Building Details Sheet (separate form)						
✓	Required Submittal		Drawings of proposed building						
	Home Business Supporting Information (separate form)		(optional) indicating overall height						
	NEW HOME CO	ONST	RUCTION						
√	√ Required Submittal								
	Surveyor's Plot Plan (Hard Copy or Digital) showing lot elevations, sanity service & storm sewer invert and driveway location								
	Two (2) Hard Copies or Digital Copy of Dra	wings	including floor and elevation plans						
	Proof of New Home Warranty Insurance								
	Proof of Provincial Builder Licensing								

^{*}Separate forms can be obtained on our website or by contacting Planning & Development



Development Permit Application Form

OFFICE USE ONLY							
Application No.: APPN Development Permit No.:							
Application Fee:	·						
Date Received:	Rec'd By:	Deemed Complete	te:	DC By:			
Any approvals granted regardi Municipal legis	i PERMIT ying with the requ t or agreement af	uirements of any fecting the build	/ Federal, Prov lings or lands.	vincial, or other			
APPLICANT/LANDOWN	NER INFORMATI	ON					
Applicant Name:			Registered O	wner Name(s):		(If differe	ent from Applicant)
Mailing Address:			Mailing Addr	ess:			
City:	Province:	Postal Code:	City:		Province:	Postal (Code:
Phone:	Cell:		Phone:		Cell:		
Email:			Email:				
PROJECT LOCATION							
Municipal Address				Roll Number			
Lot:	Block	Plan		Section	Township	Range	Meridian
PROPOSED DEVELOPM	IENT						
Existing Use of Land or Building							
Describe Proposed Development:							
Project Value:							
SIGNATURE							
I/We hereby make application supporting information submit	itted herewithin and v	which forms part of this	is application.		•		·
which it is granted and any Byl	I/We agree that in the event of a Development Permit being granted for this application, I/We will comply in all aspects with the conditions subject to which it is granted and any Bylaws or legislation pertinent to this application and the proposed development.						
I/We understand that any deve construction prior to permit iss		penalties and/or a Stop) Work Order.		:ommencement	of developme	nt or
Applicant Signature			Property Owner Sig	gnature			
Print Name	Print Name						





10003 106 Street, Westlock, AB T7P 2K3 100, 14535 118 Avenue, Edmonton, AB T5L 2M7 780.489.4777 | info@superiorsafetycodes.com 780.349.4444 | planning@westlock.ca

Permit	Building
ication	Appl
Form	

Application Number: PRM					<u></u>		Permi	t Number:	B		
Agency File Nu				_		Develo	opment Perm	nit:			
Application Date:			Applicant:]Owner	☐ Contractor					
Construction Value (iterials: <u>\$</u>			Estimated Start Dat	e:	E	Estimated Comple	eted Date:			
PROPERTY OWNER INFORMATION											
Owner Name:					Mailing Address:				City:		
Province:	Province: Postal Code: Phone:				Email:						
I hereby declare that I am the owner of the premises in/on which the work will be conducted, and reside on the property. I am doing the work myself, and assume responsibility for											
compliance with the ap	plicable Act a	and Regulat	ons.								
CONTRACTOR	NICODNAA	TION					Owners' Sigr	nature			
CONTRACTOR INFORMATION Contractor Name:				Mailing Address:				City:	City:		
Province: Postal Code: Pho			Phone:		Email:			_!			
	<u> </u>			<u> </u>							
Contractor/Ar	chitect/Eng	gineer Nar	ne		Signatur	re		- Bus	siness License Number		
The Permit holder hereby codes Act RSZ 20000, Chap for a period of 120 days. Tapplied for in writing prior	certifies that th oter S-1 states This permit exp to a permit ex	nis installation "A permit expoires after 90 spiry date.	n will be comploires if the und days if work ha	eted in accor ertaking to w as not started	dance with the Alberta Safe hich it applies: (a) Is not co and an extension has not b	ety Codes Act & mmenced with peen requested	Regulations. Sec in 90 days from d. Please note tha	tion 25(1) of the Perm the date of issue of the at a one-time ninety (9	it Regulations AR 20 permit, (b) is susp 0) day extension ca	04/2007 of the Safety ended or abandoned in be considered when	
PROJECT LOCAT	ION						1 - 11 - 1				
Municipal Address							Roll Numb	er			
Lot:		Block		Plan	Section Township			Range	Meridian		
PROJECT INFOR	MATION										
Building Occupancy:			Type of W	ork:		Building Area in Sq. Ft: New Home Construct					
☐ Single Detached	Dwelling			/ Construc	·					ects Only:	
☐ Semi/Multi-Attached Dwelling ☐ Relocation				Main Floor:				NHW#:			
☐ High Density Res	sidential		Add		2nd Floor:						
Commercial				ovation	Basement:				I		
☐ Industrial				nolition	Garage:						
☐ Institutional					I/RTM Home Deck: Total Area:						
Other: Description of Work				er:		TOTAL ALC	ea:				
Description of Work	•										
PLEASE CONTACT					OF	FICE USE (ONLY				
SUPERIOR	Permit Fe	e:				SCO Name:					
SAFETY CODES FOR	SCC Levy	(\$4.50 or 4	₩):			SCO Signature:					
INSPECTIONS, MINIMUM TWO WORKING DAYS	whichever is greater, max. \$560 Total:					Desig	Designation No.:				
NOTICE.	□DB □MC□VISA□CHQ □CSH□ONLINE Receipt No.:						Permit Issue Date:				



- 1) ISSUANCE OF A PERMIT AND THE EXAMINATION OF PLANS AND SPECIFICATIONS SHALL NOT BE CONSTRUED TO BE AUTHORITY TO VIOLATE ANY OF THE PROVISIONS OF THE SAFETY CODES ACT OR PURSUANT REGULATIONS.
- 2) A BUILDING SAFETY CODES OFFICER IS PROHIBITED FROM ISSUING A PERMIT TO AN APPLICANT IF THE APPROPRIATE ARCHITECTS AND/OR PROFESSIONAL ENGINEER'S SEALS OR STAMPS ARE NOT ON THE PLANS AND SPECIFICATIONS IF REQUIRED.
- 3) THE OWNER OF THE BUILDING IS FULLY RESPONSIBLE FOR CARRYING OUT THE WORK OR HAVING THE WORK CARRIED OUT IN ACCORDANCE WITH THE REQUIREMENTS OF THE SAFETY CODES ACT AND PURSUANT REGULATIONS.
- 4) THIS PERMIT APPLICATION IS NOT FOR ZONING/DEVELOPMENT, GAS, PLUMBING OR ELECTRICAL WORK. PERMITS FOR SUCH WORK MUST BE OBTAINED SEPARATELY.
- 5) REVIEWED DRAWINGS AND SPECIFICATIONS SHALL BE KEPT ON THE BUILDING SITE AT ALL TIMES DURING WHICH THE WORK AUTHORIZED BY THE PERMIT IS IN PROGRESS, AND SHALL BE AVAILABLE FOR INSPECTION BY A BUILDING SAFETY CODES OFFICER.
- 6) A BUILDING SAFETY CODES OFFICER MAY SUSPEND OR REVOKE A PERMIT ISSUED IN ERROR OR ISSUED ON THE BASIS OF INCORRECT INFORMATION OR IF THERE IS A CONTRAVENTION OF ANY CONDITIONS UNDER WHICH THE PERMIT WAS ISSUED OR THE PERMIT FEES HAVE NOT BEEN PAID.
- 7) ISSUANCE OF A PERMIT BASED UPON PLANS AND SPECIFICATIONS SHALL NOT PREVENT A BUILDING SAFETY CODES OFFICER FROM ISSUING ORDERS UNDER THE SAFETY CODES ACT.
- 8) ISSUANCE OF A PERMIT SHALL NOT PREVENT A BUILDING SAFETY CODES OFFICER FROM STOPPING CONSTRUCTION OPERATIONS THAT ARE IN VIOLATION OF THE SAFETY CODES ACT OR PURSUANT REGULATIONS.
- 9) EVERY PERMIT SHALL AUTOMATICALLY EXPIRE BY LIMITATION AND BE COMENULL AND VOID IF THE WORK AUTHORIZED BY THE PERMIT IS NOT COMMENCED WITHIN 90 DAYS FROM THE DATE OF ISSUE, OR IF THE BUILDING AUTHORIZED BY THE PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 120 DAYS AT ANYTIME AFTER THE WORK IS COMMENCED. BEFORE WORK CAN BE STARTED AGAIN, A NEW PERMIT SHALL BE OBTAINED OR ON RECEIPT OF A WRITTEN APPLICATION, A SAFETY CODES OFFICER FROM THE AGENCY, MAY IN WRITING, EXTEND A PERMIT FOR A LIMITED PERIOD OF TIME IF THE PERMIT HAS "NOT EXPIRED" (ONE YEAR FROM DATE OF ISSUANCE) WHEN THE APPLICATION FOR EXTENSION IS MADE.
- 10) EXCEPTIONS MAY BE MADE, AT THE DISCRETION OF A BUILDING SAFETY CODES OFFICER IN CASES OF SUMMER OR RECREATIONAL HOMES OR UNDER UNAVOIDABLE CIRCUMSTANCES.
- 11) THE APPLICANT GRANTS PERMISSION FOR NECESSARY INSPECTIONS TO BE CONDUCTED WITH THE SIGNING OF THIS APPLICATION.
- 12) AN ORDER OF A BUILDING SAFETY CODES OFFICER MAY BE APPEALED TO THE SAFETY CODES COUNCIL. FOR FURTHER INFORMATION, CONTACT SUPERIOR SAFETY CODES AT 780.489.4777.
- 13) SHOULD A PERMIT BE CANCELLED, THE HOLDER OF THE PERMIT MUST SUBMIT A WRITTEN REQUEST TO THE TOWN OF WESTLOCK. THE TOWN OF WESTLOCK WILL REFUND AS FOLLOWS:
 - i) TO THE PERMIT HOLDER, IF THERE HAS NOT BEEN AN INSPECTION 25% + GST OF THE PERMIT FEE IS RETAINED. SAFETY CODES FEES ARE NOT REFUNDABLE.
 - ii) TO THE PERMIT HOLDER, IF THERE HAS BEEN AN INSPECTION HELD NO REFUND.
- 14) FULL AND SAFE ACCESS TO THE SITE AND BUILDING MUST BE PROVIDED AND MAINTAINED.

RESIDENTIAL ADDITIONS



PERMITS & INSPECTIONS

PERMIT NO.:	
OWNERS NAME:	
PROJECT LOCATION:	

				PROJECT LOCATION:
	To be	Completed and attach	ed to the Buildi	ing Permit Application Form
A.	Roof			
	Roof Material			
	Roof Sheathing			
	Rafters x			
	or Engineered Trusses	Spacing		
3.	<u>Ceiling</u>			
	Insulation			
	Vapour Barrier			
	Ceiling Joist			0
	Ceiling Material			
C.	Walls			
	Double top plate			
	x Studs	at	on Center	
	Single bottom plate		_	©
	Insulation			-
	Vapour Barrier			
	Wall Sheathing			(F)
	Exterior wall finish			Grade
	Interior finish			Insulation
_				
υ.	<u>Beam</u> x ply	v	enocios	
	Supported at		_ species	
	xxx			
		100ting		
Ε.	<u>Foundation</u>		_	
	inch Concrete fo		ft	t below grad
	Footing wide _	thick		
F.	<u>Floor</u>			
	x underlay	sub floor		
	x Joist a		ecies Bridging	at 7" on centre
G.	Crawl Space	Commer		
•	2" sand on 6 mil poly or equa			
	Ventilation			
	Insulation			
	modiculon			