

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 on the Town's website (www.westlock.ca) or contact Planning & Development at (780) 349-4444.

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						
ADDITION (INCLUDING COVERED DECK)		SECONDARY SUITE				
~	Required Submittal	~	Required Submittal			
	Site Plan (a Real Property Report can be used) indicating proposed location, size and setbacks to property lines and other buildings on site		Site Plan (a Real Property Report can be used) indicating location and stall size of 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 used) indicating proposed location, size and setbacks to property lines		Site Plan (a Real Property Report can be used) indicating proposed location, size and setbacks to property lines and other buildings on site			
HOME OCCUPATION			Accessory Building Details Sheet (separate form*)			
*	Required Submittal Home Occupation Supporting Information (separate form*)		Drawings of proposed building (optional) indicating overall height			
NEW HOME CONSTRUCTION						
~	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 Drawings 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 at (780) 349-4444



Development Permit Application Form

Development Application No.: __ Office use only Application Fee: _ □DB □MC □VISA □CHQ □CSH Receipt Number: _ Land Use District: _ DC Bv: Date Received: Rec'd By: Deemed Complete: IMPORTANT: THIS IS NOT A BUILDING PERMIT Any approvals granted regarding this application does not excuse the applicant from complying with the requirements of any Federal, Provincial or other Municipal Legislation or the conditions of any easement, restrictive covenant or agreement affecting the buildings or lands. **Applicant/Landowner Information** (if different from Applicant) Registered Owner Name(s): Applicant Name: Mailing Address: Mailing Address: Postal Code: Postal Code: Cell: Cell: Ph: Email **Project Location** Municipal Address **Roll Number** Lot(s) Block Plan Section Township Range Meridian W4 **Proposed Development Information** Existing Use of Land or Building(s) on the Property: **Describe Proposed Development:** Project Value: __ **Signature** I/We hereby make application for a development permit under the provisions of the Town of Westlock Land Use Bylaw 2015-02 in accordance with the plans and supporting information submitted herewith and which forms part of this application. I/We agree that in the event of a Development Permit being granted for this application, I/We will comply in all respects with the conditions subject to which it is granted and any Bylaws or legislation pertinent to this application and to the proposed use.

The personal information provided by you is being collected under the authority of the *Municipal Government Act* and will be used for the purposes under that Act. The personal information that you provide may be made public, subject to the provisions of the *Freedom of Information and Protection of Privacy Act* (FOIP). If you have any questions about the collection, use, and disclosure of this information, please contact the FOIP Coordinator at the Town of Westlock at 780-349-4444.

Property Owner Signature

Applicant Signature

Print Name

^{*}All development and construction that occurs prior to permit issuance is subject to a penalty which amounts to double the current permit fee. A Stop Work Order may also be issued.



Town of Westlock

10003 106 Street Westlock, AB T7P 2K3 Phone: 780-349-4444 Fax: 780-349-4436 planning@westlock.ca



Inspection Requests:

Superior Safety Codes Inc. 14613-134 Avenue Edmonton, AB T5L 4S9 Phone: 780-489-4777

Fax: 780-489-4711

BUILDING PERMIT APPLICATION FORM

Applicant: Owner Contractor	Permit Number: 345345B						
Application Date:	Development Pe	rmit:					
Construction Value (Labor + Materials): \$ Es	imated Start Date: Estimated Comple	stimated Completion Date:					
Owner Name: M	ailing Address:City:	City:					
Prov: Postal Code: Phone:	Email:						
Owners Signature "I hereby declare I am the owner of the premises in which the work will be conducted, and reside on the property. I am doing the work myself, and assume responsibility for compliance with the applicable Act and Regulations"							
Contractor Name:Mailing Address:							
City: Prov: Postal Code	Phone: Cell:						
Fax:Email:							
Contractor/Architect/Engineer Name	Signature Business	License Number					
Project Location in the Town of Westlock:							
Street Address:	Roll Number:						
Lot: Block: Plan:							
Legal Subdivision: Part of: Section:Tow	nship:Range: W4						
Building Occupancy: ☐ Single Family Dwelling ☐ Semi/Multi Attached Dwelling ☐ High Density Residential ☐ Commercial ☐ Industrial ☐ Institutional ☐ Other ☐ Other ☐ Type of Work: ☐ New Construction ☐ Relocation ☐ Addition ☐ Renovation ☐ Demolition ☐ Manufactured/ M	Number of Stories Prodular Home Number of Stories Prodular Home Number of Stories Prodular Home Number of Stories Production Number of Stories Production <td>ew Home Construction rojects Only: HW#: ovincial Builder License #:</td>	ew Home Construction rojects Only: HW#: ovincial Builder License #:					
Description of Work:							
Payment Type: ☐ Cash ☐ Cheque ☐ Visa ☐ Online ☐ M/C ☐ Amex ☐ Interac	SUPERIOR SAFETY CODES OFFICE USE ONLY Issuing Officer's Name:						
Permit Fee: + SCC Levy*	Issuing Officer's Signature:						
Total Cost: Receipt #:*\$4.50 or 4% of the permit fee (whichever is greater), maximum \$560.00	Designation Number:	Designation Number:					
	Permit Issue Date:						

PLEASE CONTACT SUPERIOR SAFETY CODES INC. FOR INSPECTIONS ALLOWING FOR TWO WORKING DAYS NOTICE.

The personal information provided as part of this application in collected under Sec. 43 of the Safety Codes Act and Sections 303 and 295 of the Municipal Government Act and in accordance with Section 32.c of the Freedom of Information and Protection of Privacy Act.

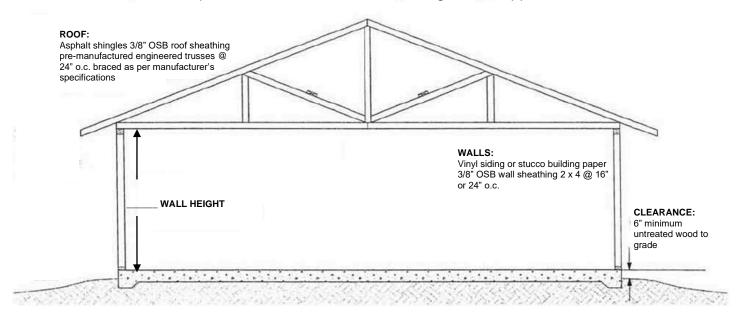
The Permit holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act & Regulations. Section 25(1) of the Permit Regulations AR 204/2007 of the Safety Codes Act & RSZ 20000, Chapter S-1 states "A permit expires if the undertaking to which it applies: (a) Is not commenced within 90 days from the date of issue of the permit, (b) is suspended or abandoned for a period of 120 days." This permit expires after 90 days if work has not started and an extension has not been requested. Please note that a onetime ninety (90) day extension can be considered when applied for in writing prior to a permit expiry date.



ACCESSORY BUILDING

PERMIT NO.:	
OWNERS NAME:	
PROJECT LOCATION: _	

To be completed and attached to the Building Permit Application Form



Please check off construction details as listed below.

	ofing Material			<u>eathing</u>			
	Asphalt Shingles	Spe	city:				
	Cedar, Pine Shakes/Shingles						
Ш	Metal Roofing	Wall Framing					
	Other Specify:	Spe	cify:				
Roc	of Sheathing		Insu	ulated wa	alls 8	ceiling	J
	Min. 3/8" OSB or plywood						
NOT	E: OSB or plywood less than ½" requires H clips	Ove	rhea	ad Door	Bear	<u>m</u>	
and l	bridge blocking	Leng	gth: _				
	1/2" OSB or plywood						
	Other Specify:	Dep	th:				# of Plys
Roof Framing			П	Built U	q	П	Engineered
$\overline{\Box}$	Pre-manufactured Engineered Truss		_			_	3
$\bar{\Box}$	Roof rafters, ceiling, joists, roof joist	Ove	rhea	ad Door			
_	(provide details)	_					
	,						
EXT	erior Finish						
	Vinyl Siding	D:	- 4	(T			
	Stucco			n of Tru		_	haratata an anasatan
	Metal Siding			•			head door opening
Ш	Other Specify:				rpend	dicular t	o overhead door
Ear	Indation		ope	ening			
	4" Slab up to 592 sq. ft.						
	Strip footing & 4' frost wall						
	. •						
	Other Foundation (details, engineering)						
	On Skids						

NOTE: Separate permit applications are required for the installation of electrical, gas and/or plumbing in the building.

Fax: 403-320-9969

Toll Free Ph: 1-877-320-0734

Toll Free Ph: 1-888-358-5545

Toll Free Fax: 1-888-717-2340 Toll Free Fax: 1-866-999-4711

Toll Free Fax: 1-866-358-5085