

**DISTRICT OF FORT ST. JAMES**  
**APPLICATION TO ERECT, ALTER, REPAIR, RENOVATE OR REMOVE A BUILDING**

NAME/ADDRESS/TELEPHONE: \_\_\_\_\_ DATE \_\_\_\_\_  
OWNER \_\_\_\_\_  
CONTRACTOR \_\_\_\_\_  
ARCHITECT \_\_\_\_\_  
ADDRESS/HOUSE NUMBER \_\_\_\_\_  
PROPERTY ROLL No. \_\_\_\_\_ LEGAL DESCRIPTION \_\_\_\_\_

RANGE 5, COAST DISTRICT.

APPLICANT **MUST** CIRCLE APPROPRIATE PHRASE THAT DESCRIBES THE CIRCUMSTANCE OF THIS APPLICATION.

BUILDING USE: SINGLE FAMILY/MULTI-FAMILY/CARPORT/GARAGE/COMMERCIAL/OTHER \_\_\_\_\_

CLASS OF WORK: NEW/ADDITION/ALTERATION/REPAIR/DEMOLISH/MOVE

DESCRIBE PROPOSED WORK \_\_\_\_\_

ESTIMATED TOTAL VALUE \$ \_\_\_\_\_

BUILDING INSPECTOR'S ESTIMATE \$ \_\_\_\_\_

SIZE OF BUILDING ADDITION: AREA (SQ. FT.) \_\_\_\_\_ FRONT (FT.) \_\_\_\_\_

DEPTH (FT.) \_\_\_\_\_ SET BACK (FT.) \_\_\_\_\_ HEIGHT FROM GRADE TO HIGHEST

POINT (FT.) \_\_\_\_\_ No. OF STORIES \_\_\_\_\_

**CONSTRUCTION DETAILS:**

FOUNDATION: CONCRETE/TREATED WOOD/WALL THICKNESS \_\_\_\_\_ INCHES

BASEMENT/CRAWL SPACE: FULL/PARTIAL

FLOOR: CONCRETE/TREATED WOOD

ROOF: FLAT/PEAKED/MANSARD

INSULATION FACTOR: CEILING R \_\_\_\_\_ WALLS R \_\_\_\_\_

WINDOWS: SINGLE/DOUBLE/TRIPLE GLAZED

PLUMBING: No. OF COLD WATER OUTLETS \_\_\_\_\_ SEWER/SEPTIC TANK

HEATING: GAS/ELECTRIC/OIL/WOOD/OTHER \_\_\_\_\_

FIREPLACE: HOW MANY \_\_\_\_\_ TYPE \_\_\_\_\_ ZERO CLEARANCE

(A) I acknowledge that if I am granted a building permit pursuant to this application that I am responsible for compliance with the current edition of the British Columbia Building Code, this bylaw and any other applicable enactment, code, regulation or standard relating to the work in respect of which the permit is issued, whether or not the said work is undertaken by me or by those whom I retain or employ to provide design and/or construction services.

(B) I acknowledge that neither the issuance of a permit under this bylaw, the acceptance nor review of plans, specifications, drawings or supporting documents, nor inspections made by or on behalf of the District constitute a representation, warranty, assurance or statement that the current edition of the British Columbia Building Code, the Building Bylaws of the District of Fort St. James or any other applicable enactment, code, regulation or standard has been complied with.

(C) I understand that I should seek independent legal advice in respect of the responsibilities I am assuming upon the granting of a building permit by the District pursuant to this application and in respect of the execution of this acknowledgement.

I/we, have read the above and understand it, and I/we have received a copy of the District of Fort St. James Building Bylaw.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

**SERVICES INFORMATION**

SEWER CONNECTION                      REQUIRED                       EXISTING                       SIZE \_\_\_\_\_

WATER CONNECTION                      REQUIRED                       EXISTING                       SIZE \_\_\_\_\_

CULVERT                                      REQUIRED                       EXISTING                       SIZE \_\_\_\_\_

I/we, understand and agree that additional fees are required for the above services and that a certificate of inspection is required from the Superintendent of Public Works prior to any backfilling or charging of lines.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

**TO BE FILLED OUT BY AUTHORITY HAVING JURISDICTION**

APPLICATION APPROVED OR \_\_\_\_\_ DATE \_\_\_\_\_

PERMIT No. \_\_\_\_\_

SPECIAL CONDITIONS \_\_\_\_\_ BUILDING INSPECTOR

ZONING - DOES WORK PROPOSED IN APPLICATION CONFORM TO EXISTING ZONING? \_\_\_\_\_

- WHAT IS ZONE? \_\_\_\_\_

**OTHER COMMENTS:**

ALL APPLICATIONS FOR COMMERCIAL, INDUSTRIAL, OR MULTI-FAMILY CONSTRUCTION MUST BE APPROVED BY THE UNDER-NOTED DEPARTMENTS BEFORE A PERMIT WILL BE ISSUED.

BUILDING DEPARTMENT \_\_\_\_\_

PUBLIC WORKS DEPARTMENT \_\_\_\_\_

MUNICIPAL CLERK'S DEPARTMENT \_\_\_\_\_