

Long-form COMMERCIAL BUILDING PERMIT APPLICATION

Provide all required information--with clarity, precision and detail sufficient for the project--or the application may be refused.

Use the 'GUIDE TO COMMERCIAL BUILDING PERMIT PROCESS' that accompanies this form.

REFER TO GUIDE SECTION NUMBER ↓

REQUIRED INFORMATION

REQUIRED INFORMATION

A – General Project Information				APPLICANT'S PROJECT NAME:		01
PROJECT MUNICIPAL ADDRESS + Suite/ Unit # OR Legal Description as Plan/Block/Lot OR Rural location as Quarter/Section/Twp/Rge						
DESCRIPTION OF PROPOSED WORK ABC2014:B:9.36 <input type="checkbox"/> YES -OR- NECB <input type="checkbox"/> YES ATTACH SUPPLEMENTS -OR- NOT IN SCOPE <input type="checkbox"/>						02
CHECK <input checked="" type="checkbox"/> ALL APPLICABLE TO PROPOSED WORK <input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Interior Alteration <input type="checkbox"/> Exterior Alteration <input type="checkbox"/> Change of Use <input type="checkbox"/> Demolition <input type="checkbox"/> Gas <input type="checkbox"/> Plumbing <input type="checkbox"/> HVAC <input type="checkbox"/> Sewer <input type="checkbox"/> Unmetered construction water <input type="checkbox"/> Electrical <input type="checkbox"/> Use of public walks/roads/land <input type="checkbox"/> Hoarding <input type="checkbox"/> Shoring <input type="checkbox"/> Crane <input type="checkbox"/> Temporary construction heat <input type="checkbox"/>						03
Total area of work m ² ft ²	# new/removed dwellings:	# new/removed bedrooms:	<input type="checkbox"/> Existing approved land use DP Project #: <input type="checkbox"/> NEW Development Permit Project #:	Cost of construction \$		04
PROJECT APPLICANT Check <input checked="" type="checkbox"/> all applicable → Applicant is also: <input type="checkbox"/> Property Owner <input type="checkbox"/> Authorized agent of owner <input type="checkbox"/> Designer <input type="checkbox"/> Constructor						05
Contact: Last name		First name		Company name		City Customer ID #
Mailing address			City	Prov	Postal Code	
Email - (mandatory)		Inspection results to this email? Yes <input type="checkbox"/> No <input type="checkbox"/>		Telephone		Mobile
PROPERTY OWNER Check <input checked="" type="checkbox"/> all applicable → Applicant is also: <input type="checkbox"/> Designer <input type="checkbox"/> Constructor						
Contact: Last name		First name		Company name		City Customer ID #
Mailing address			City	Prov	Postal Code	
Email		Telephone		Mobile		
CONSTRUCTOR Check <input checked="" type="checkbox"/> if applicable → Constructor is also: <input type="checkbox"/> Designer City Business Licence #						
Contact: Last name		First name		Company name		City Customer ID #
Mailing address			City	Prov	Postal Code	
Email (mandatory)		Inspection results are sent to this email		Telephone		Mobile
APPLICANT DECLARATION: I, (PRINT NAME) _____ confirm by my signature below that						
1) the information contained in and with this application for building permit-- including drawings, documents, details, specifications, professional schedule letters and supporting information, including any Energy Performance Compliance requirements of ABC2014:B:9.36 or NECB2011-- pertain to the project that is the subject of this application and is, to the best of my knowledge, true and complete;						
2) the PROPERTY OWNER (person, partnership, condominium, corporation, or other) is aware of and has authorized this application for building permit;						
3) I am aware that the New Home Buyer Protection Act requires a valid residential building warranty or exemption proof be provided prior to building permit issuance: Warranty Confirmation No.: _____ -OR- exemption attached -OR- I will provide prior to building permit being issued; and						
4) I am aware that NO WORK on this project is authorized before the building permit is issued.						
THIS IS NOT A PERMIT Date: _____				Signature of Applicant: _____		

Use the 'GUIDE TO COMMERCIAL BUILDING PERMIT PROCESS' that accompanies this form

REFER TO GUIDE SECTION NUMBER ↓

REQUIRED INFORMATION | ALBERTA BUILDING CODE ANALYSIS (Optional)

B – Drawings and Documents 1 COPY of drawings/documents/details required; clamped or lightly stapled

PLAN OF SURVEY <input type="checkbox"/> No <input type="checkbox"/> Yes ARCHITECTURAL drawings stamped, signed and dated? <input type="checkbox"/> No <input type="checkbox"/> Yes CODE ANALYSIS for project scope included on the drawings? <input type="checkbox"/> Yes <input type="checkbox"/> No → Applicant requested to complete C - Code Analysis below	SITE PLAN <input type="checkbox"/> Yes KEY PLAN indicating all tenants of floor area/building <input type="checkbox"/> Yes Schedules required? <input type="checkbox"/> No <input type="checkbox"/> Yes → Schedules provided? <input type="checkbox"/> Yes → Applicant requested to complete C - Code Analysis below	06
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STRUCTURAL drawings stamped, signed and dated? <input type="checkbox"/> No <input type="checkbox"/> Yes GEOTECHNICAL report provided? <input type="checkbox"/> No foundation work <input type="checkbox"/> Yes, for new foundation/addition COMPONENTS, DRAWINGS OR DESIGNS by Alberta PEng other than engineer of record? <input type="checkbox"/> None <input type="checkbox"/> Yes → Marked as reviewed? <input type="checkbox"/> Yes SOLAR PV SYSTEM <input type="checkbox"/> or SOLAR THERMAL SYSTEM <input type="checkbox"/> see www.edmonton.ca/solarenergysystems	Schedules required? <input type="checkbox"/> No <input type="checkbox"/> Yes → Schedules provided? <input type="checkbox"/> Yes Schedules provided? <input type="checkbox"/> Yes	07
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MECHANICAL drawings stamped, signed and dated? <input type="checkbox"/> No <input type="checkbox"/> Yes HVAC drawings provided? <input type="checkbox"/> No <input type="checkbox"/> Yes → <input type="checkbox"/> Commercial kitchen exhaust/MUA/suppression? <input type="checkbox"/> Paint booth? PLUMBING drawings provided? <input type="checkbox"/> No <input type="checkbox"/> Yes → <input type="checkbox"/> Fats + oils + grease interceptor/trap? GAS drawings provided? <input type="checkbox"/> No <input type="checkbox"/> Yes → # NEW GAS METERS= _____ and unique addressing identified for ATCO? <input type="checkbox"/> Yes SPRINKLER drawings provided? <input type="checkbox"/> No sprinklers <input type="checkbox"/> Will be provided <input type="checkbox"/> Yes Schedules provided? <input type="checkbox"/> Yes OR included in mechanical <input type="checkbox"/> Yes Hydraulic calculations provided? <input type="checkbox"/> Will be provided <input type="checkbox"/> No floor area increase <input type="checkbox"/> Yes Sprinkler protected glazing? <input type="checkbox"/> No <input type="checkbox"/> Yes	Schedules required? <input type="checkbox"/> No <input type="checkbox"/> Yes → Schedules provided? <input type="checkbox"/> Yes Schedules provided? <input type="checkbox"/> Yes	08
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ELECTRICAL drawings stamped, signed and dated? <input type="checkbox"/> No <input type="checkbox"/> Yes FIRE ALARM <input type="checkbox"/> No fire alarm <input type="checkbox"/> New alarm system <input type="checkbox"/> Alteration to existing	Schedules required? <input type="checkbox"/> No <input type="checkbox"/> Yes → Schedules provided? <input type="checkbox"/> Yes Schedules provided? → <input type="checkbox"/> included with electrical <input type="checkbox"/> Yes	09
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C – Code Analysis Check ✓ all applicable *Applicant to complete Code Analysis if not provided on plans*

SEE GUIDE for ENERGY CODE & ENERGY EFFICIENCY SUPPLEMENTS	<input type="checkbox"/> NEW CONSTRUCTION include NECB or 9.36 SUPPLEMENT <input type="checkbox"/> New Building - OR- <input type="checkbox"/> Addition → complete next also →	+ <input type="checkbox"/> EXISTING BUILDING <input type="checkbox"/> Exterior alt'n <input type="checkbox"/> Interior alt'n <input type="checkbox"/> Change of occupancy / use	= RESULTING CONSTRUCTION Complete ONLY if both columns to the left are completed	10
Building area	m ² ft ²	m ² ft ²	m ² ft ²	11
Number of Storeys				12
Basement levels	<input type="checkbox"/> None <input type="checkbox"/> Yes → number _____	<input type="checkbox"/> None <input type="checkbox"/> Yes → number _____	<input type="checkbox"/> None <input type="checkbox"/> Yes → number _____	13
Mezzanine(s)	<input type="checkbox"/> None <input type="checkbox"/> Yes → number _____	<input type="checkbox"/> None <input type="checkbox"/> Yes → number _____	<input type="checkbox"/> None <input type="checkbox"/> Yes → number _____	14
Total affected area	m ² ft ²	m ² ft ²	m ² ft ²	15
Building height	m ft	m ft	m ft	16
Number of streets	1 2 3 or more	1 2 3 or more	1 2 3 or more	17
Type of construction	<input type="checkbox"/> Combustible <input type="checkbox"/> Non-combustible	<input type="checkbox"/> Combustible <input type="checkbox"/> Non-combustible	<input type="checkbox"/> Combustible <input type="checkbox"/> Non-combustible	18
Sprinkler system	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes, entire building	19
Fire alarm system	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes, entire building	20
Standpipe system	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	21
Occupancies [circle all]	Major → A1 A2 A3 B1 B2 B3 C D E F1 F2 F3	Minor → A1 A2 A3 B1 B2 B3 C D E F3		22
ABC2014 <input type="checkbox"/> Part 9 –OR- <input type="checkbox"/> 3.2.2. _____ ABC2014:B:9.36 <input type="checkbox"/>YES -OR- NECB <input type="checkbox"/>YES -OR- NOT IN SCOPE <input type="checkbox"/>				23

Use 'GUIDE TO COMPLETING COMMERCIAL BUILDING PERMIT APPLICATION'

REFER TO GUIDE SECTION NUMBER



ADDITIONAL BUILDING CONSTRUCTION DETAILS

(to speed processing)

D – Additional Building Details Check <input checked="" type="checkbox"/> all applicable <i>Provision of details will help speed processing</i>					
FRR=Fire-resistance rating Sep'n=separation	<input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> New building OR <input type="checkbox"/> Addition → complete next also →	<input type="checkbox"/> EXISTING BUILDING <input type="checkbox"/> Exterior alt'n <input type="checkbox"/> Interior alt'n <input type="checkbox"/> Change of occupancy / use	RESULTING CONSTRUCTION Complete ONLY if both columns to the left are completed		24
Firewalls FRR	<input type="checkbox"/> None <input type="checkbox"/> 2h <input type="checkbox"/> 4h	<input type="checkbox"/> None <input type="checkbox"/> 2h <input type="checkbox"/> 4h	<input type="checkbox"/> None <input type="checkbox"/> 2h <input type="checkbox"/> 4h		25
Floors FRR	<input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> 1½h <input type="checkbox"/> 2h <input type="checkbox"/> Unrated: Non-combustible	<input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> 1½h <input type="checkbox"/> 2h <input type="checkbox"/> Unrated: Non-combustible	<input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> 1½h <input type="checkbox"/> 2h <input type="checkbox"/> Unrated: Non-combustible		26
Mezzanine FRR	<input type="checkbox"/> None <input type="checkbox"/> Unrated <input type="checkbox"/> Non-comb <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> Waived 3.2.2.18.(4)	<input type="checkbox"/> None <input type="checkbox"/> Unrated <input type="checkbox"/> Non-comb <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> Waived 3.2.2.18.(4)	<input type="checkbox"/> None <input type="checkbox"/> Unrated <input type="checkbox"/> Non-comb <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> Waived 3.2.2.18.(4)		27
Roof FRR	<input type="checkbox"/> Unrated <input type="checkbox"/> Non-comb <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> 2h <input type="checkbox"/> Waived 3.2.2.18.(3)	<input type="checkbox"/> Unrated <input type="checkbox"/> Non-comb <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> 2h <input type="checkbox"/> Waived 3.2.2.18.(3)	<input type="checkbox"/> Unrated <input type="checkbox"/> Non-comb <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> 2h <input type="checkbox"/> Waived 3.2.2.18.(3)		28
Occupancy sep'n	<input type="checkbox"/> None <input type="checkbox"/> 1h <input type="checkbox"/> 1½h <input type="checkbox"/> 2h	<input type="checkbox"/> None <input type="checkbox"/> 1h <input type="checkbox"/> 1½h <input type="checkbox"/> 2h	<input type="checkbox"/> None <input type="checkbox"/> 1h <input type="checkbox"/> 1½h <input type="checkbox"/> 2h		29
Suite sep'n	<input type="checkbox"/> None <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> 2h <input type="checkbox"/> Unrated	<input type="checkbox"/> None <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> 2h <input type="checkbox"/> Unrated	<input type="checkbox"/> None <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> 2h <input type="checkbox"/> Unrated		30
Public corridor sep'n	<input type="checkbox"/> None <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> Unrated	<input type="checkbox"/> None <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> Unrated	<input type="checkbox"/> None <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> Unrated		31
Exit sep'n	<input type="checkbox"/> None <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> 2h	<input type="checkbox"/> None <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> 2h	<input type="checkbox"/> None <input type="checkbox"/> ¾h <input type="checkbox"/> 1h <input type="checkbox"/> 2h		32
Storage garage sep'n	<input type="checkbox"/> None <input type="checkbox"/> 1h <input type="checkbox"/> 1½h <input type="checkbox"/> 2h	<input type="checkbox"/> None <input type="checkbox"/> 1h <input type="checkbox"/> 1½h <input type="checkbox"/> 2h	<input type="checkbox"/> None <input type="checkbox"/> 1h <input type="checkbox"/> 1½h <input type="checkbox"/> 2h		33
Repair garage sep'n	<input type="checkbox"/> None <input type="checkbox"/> 1h <input type="checkbox"/> 2h	<input type="checkbox"/> None <input type="checkbox"/> 1h <input type="checkbox"/> 2h	<input type="checkbox"/> None <input type="checkbox"/> 1h <input type="checkbox"/> 2h		34
Barrier-free provisions	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes		35
For exterior wall construction and/or change use only. Does not apply to tenant improvements within existing-use building.					36
Building Elevation, per site plan	NORTH	EAST	SOUTH	WEST	37
Total area of unprotected openings	m ² ft ²	m ² ft ²	m ² ft ²	m ² ft ²	38
Exposing building face wall area	m ² ft ²	m ² ft ²	m ² ft ²	m ² ft ²	39
Unprotected openings as % of wall area	%	%	%	%	40
Limiting distance of new or altered wall	m	m	m	m	41
Minimum required wall rating	h	h	h	h	42
Non-combustible construction required?	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	42
Non-combustible cladding required?	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	42

