



**Township of Tiny Building Department
130 Balm Beach Road West, Tiny, Ontario, LOL 2JO
Telephone 705-526-4204 or 705-526-5965 Fax 705-526-2372**

Requirements to submit an application to install a wood burning appliance

The following documents are to be submitted with an application:

1. Site Plan

One copy of a sketch to scale showing the property dimensions with all existing and proposed structures including all details in accordance with the Township Building By-Law.

2. Municipal Application (form included in package)

Please complete the municipal application to assist the Building Department to receive and process the application.

3. Application for a Permit to Construct or Demolish (form included in package)

Fill in all sections of this application. At least one property owner must sign. For new owners please submit a copy of the registered transfer deed.

4. Agent Authorization (form included in package)

If an owner of the property assigns someone to submit an application on their behalf this form is required. At least one property owner must sign this form.

5. Building Permit Fees

Building Permit Fees are calculated by the Building Department upon receiving an application as per Fee Schedule By-law.

6. Wood Energy Technical Training Report (obtain from qualified person)

For each wood burning appliance installed, a Wood Energy Technical Training inspection report is required once unit is installed from a qualified person upon completion.

7. Other Approvals

As required, to determine proposed construction conforms to all applicable laws.

NOTE: PAPER SIZE CANNOT EXCEED 11x17

PLEASE BOOK AN APPOINTMENT TO SUBMIT IN PERSON



The Corporation of the Township of Tiny Municipal Application for Building Permit

Roll Number: _____

Please check if a wood burning appliance is being installed:

Woodstove Fireplace Fireplace Insert Masonry Chimney Steel Chimney

Source Protection Plan

1. Is the subject property within a Well Head Protection Area (WHPA)? YES NO
2. If yes, you must complete and submit the Source Protection Plan Pre-Application Screening Form
3. To search a property location to see if it is within a WHPA (vulnerable area) visit www.ourwatershed.ca.
4. Please note that this application maybe delayed and/or refused if the proposed development offends the Source Protection Plan for the Southern Georgian Bay Lake Simcoe Source Protection Region. If the application requires detailed review by the Severn Sound Environmental Association (SSEA), the Risk Management Office, a fee of \$240.00 is required to cover such costs.

HOW MANY PROPOSED BEDROOMS _____

PLACE SIZE OF PROPOSED CONSTRUCTION FOR EACH OF THE APPLICABLE AREAS

TYPE OF CONSTRUCTION	SIZE (FT)	FT ²	ESTIMATED COST
SDD* FINISHED BASEMENT			
SDD* UNFINISHED BASEMENT			
SDD* FIRST FLOOR			
SDD* SECOND FLOOR			
ADDITION			
DECKS			
COVERED PORCHES			
ATTACHED GARAGE			
DETACHED GARAGE/SHED			
CARPORT			
POLE-TYPE BUILDING			
RENOVATION			
ACCESSORY BUILDING			
DEMOLITION			
OTHER**			

* SDD denotes Single Detached Dwelling

** Commercial, Institutional & Industrial

Application for a Permit to Construct or Demolish

This form is authorized under subsection 8(1.1) of the *Building Code Act*, 1992

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 ²)		
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:		
Last name	First name	Owner or	Authorized agent of owner	
Street address		Corporation or partnership	Unit number	
Municipality	Postal code	Province	Lot/con.	
Telephone number	Fax			
D. Owner (if different from applicant)				
Last name	First name	Corporation or partnership		
Street address		Unit number	Lot/con.	
Municipality	Postal code	Province	E-mail	
Telephone number	Fax			
Cell number				

E. Builder (if known)			
Last name	First name	Corporation or partnership (if applicable)	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number	Fax	Cell number	
F. New home construction licensing requirement			
i. Is the proposed construction for a new home as defined in the <i>New Home Construction Licensing Act, 2017</i> ? If no, go to section G.		<input type="checkbox"/> Yes	<input type="checkbox"/> No
ii. Is a licence required under the <i>New Home Construction Licensing Act, 2017</i> ?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
iii. If yes to (ii) provide licence number(s): _____			
G. Required Schedules			
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.			
H. Completeness and compliance with applicable law			
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).		<input type="checkbox"/> Yes	<input type="checkbox"/> No
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
I. Declaration of applicant			
I _____ declare that: (print name)			
<ol style="list-style-type: none"> 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., 12th Floor, Toronto, ON M7A 2J3 (416) 585-6666.



Agent Authorization

I/We _____, being the Legal

Owner(s) of Municipal Address _____

Lot _____ Plan _____ Concession _____ in the Township of

Tiny authorize: _____

to act as my (our) agent and to apply for building permits on this property.

Signature of legal Owner(s)

Signature of legal Owner(s)

Date: _____