

 <p>CORPORATION OF THE TOWNSHIP OF EAR FALLS 2 Willow Crescent – P. O. Box 309 Ear Falls, ON P0V 1T0 Phone: 807-222-3624 Fax: 807-222-2384 www.ear-falls.com</p>	Building Permit		Permit No.
	Application For a		Property Identifier
	Wood Burning Appliance		ONHWP Reg. No. *
	<i>Building Code Act, S.O. 1992, Chapter 23.8-(1). Applicants are required to submit a separate application for each temporary structure, or structure to be constructed or demolished.</i> <i>All construction must conform to the Ontario Building Code, Ontario Regulation 350/06, as amended.</i> <i>A Builders Registration Number is required by the Ontario New Home Warranty Plan Act, S.O. 1980, Chapter 350.6, as amended.</i> Construction must not start until a permit has been issued. <i>The issuance of a permit does not relieve the applicant from conforming with all applicable regulations and municipal by-laws</i>		Date of Application
			APPLICANTS ARE REQUIRED TO COMPLETE ALL PAGES OF THIS APPLICATION

Owner's Info: Name: _____

Daytime phone: _____ Cell: _____ E-mail : _____

Owner's Street Address: _____

Owner's Mailing Address: _____

Permit Applicant's Info (if different from owner): Name: _____

Permit Applicant's Address (if different from owner): _____

Daytime phone: _____ Cell: _____ E-mail : _____

Applicant's role in the project (If different from owner): Installation Contractor Other (specify) _____

Does the installer have WETT Certification: Yes No Another Certification (Specify) _____

What is the nature of your appliance? Fireplace Fireplace Insert Central Heating Appliance
 Space Heater Stove Other (specify) _____

If it is a Central Heating Appliance, is it an indoor appliance or an outdoor appliance? Indoor Outdoor

If it is an outdoor central heating appliance, what is the zoning of your property?

Are you replacing a solid fuel wood burning appliance or installing a new appliance? Replacing New

Is the appliance you are installing a brand new appliance or an older appliance: Brand new Older

Who is the manufacturer of your appliance?

Model name & model number of appliance?

What are the certifications listed on the back of your appliance? CSA B365 ULC S627
 CSA B366.1 ULC S628 ULC S610 Other (specify) _____

Clearances planned from combustibles (including any drywall): Front _____ inches; Rear _____ inches;

One side _____ inches; Other side _____ inches; Top _____ inches; Bottom _____ inches;

Minimum clearances listed at the back of the appliance: Front _____ inches; Rear _____ inches;

One side _____ inches; Other side _____ inches; Top _____ inches; Bottom _____ inches;

If an indoor appliance, how many alarms do you have? Smoke alarmscarbon monoxide alarms

How many floors do you have (count basement as one floor) in your house?

Do you have a minimum of one carbon monoxide alarm and one smoke alarm for each floor? Yes No

If an outdoor Central Heating Appliance, what is its closest distance to any dwelling on the property f t .

What is the distance from the closest accessory building?ft. What will be the chimney height?ft.

From front lot lineft. From rear lot lineft. From one side lot lineft. From other side lot line.....ft.

Is the appliance in the front yard? Yes No Is either of the side yards an exterior side yard? Yes No

Is it a masonry chimney? Yes No Does the masonry chimney have a metal insert? Yes No

Is it a Type A chimney? Yes No If yes, what is the certification listed on it?

Is it a 650° metal chimney? Yes No If yes, what is the certification listed on it?

Are you using a heat shield? Yes No If yes, what is the certification listed on it?

.....

Are you using glass screens for masonry fireplaces? Yes No

If yes, what is the certification listed on it?

Are you using a steel liner for your masonry fireplace? Yes No

If yes, what is the certification listed on it?

Are you using a liner for existing masonry and factory-built chimney? Yes No

If yes, what is the certification listed on it?

What is the certification listed on your chimney connectors?

ABANDONMENT AND CANCELLATION

Building and Demolition Permits are deemed to be abandoned and cancelled and the **Chief Building Official** may revoke such permits six months after the date of issue, unless such construction is seriously being proceeded with, or if construction is stopped for over twelve months. If construction is not completed within 2 years of issue of Building Permit, then new permit application is to be submitted for the remainder of work.

All statements and representations contained in the attached documents filed in support of this application shall be deemed part of this application for all purposes. Sufficient information shall be submitted with the application to enable the **Chief Building Official** to determine whether or not the proposed work will conform to the **Building Code Act** and regulations made thereunder and any other applicable law.

FEES

Permit fees	:	\$ 50.00
Withdrawal of Permit		\$ 50.00
Transfer of Permit		\$ 50.00
TOTAL TO PAY		\$

F. PERMISSION FOR AN AGENT TO MAKE APPLICATION

I, the undersigned..... certify that I have appointed to be my agent for the purpose of application for a building permit and that such permission shall not relieve me of any of my responsibility pursuant to the Building Code Act.

Witness **Signed**
Representative, Township of Ear Falls Owner

Dated at the Township of Ear Falls, Ontario this **day of** **20**.....

DECLARATION

I, the undersigned, **am the Owner/Authorized Agent of the Owner** named in the application herein and certify the truth of all statements or representations contained herein.

I understand that the issuance of a **Wood Burning Appliance Permit** shall not be deemed a waiver of any provisions of any By-laws or requirements of the **CSA standard B365, Township of Ear Falls By-laws, Building Code Act** or any regulations made thereunder, notwithstanding anything included or omitted from the plans or other material filed in support or connection with the application herein.

I acknowledge that in the event a Wood Burning Appliance Permit is issued, any departure from plans, manufacturer's specifications or building locations proposed in this application is prohibited and such could result in the **Wood Burning Appliance Permit** being revoked.

I further acknowledge that in the event the Wood Burning Appliance Permit is revoked for any cause or irregularity or non-conformity with *By-laws or requirements of the Building Code Act, or any regulations* made thereunder, there shall be no right of claim whatsoever against the Municipal Corporation or any official thereof and any such claim is hereby expressly waived.

Dated at the Township of Ear Falls, Ontario this **day of** **20**.....

Witness **Signed**

Employee, Township of Ear Falls

Owner or Authorized Agent of the Owner

For Office use-only.

Certifications match? Yes No Enough smoke and carbon monoxide alarms? Yes No

Zoning of property:

Replacing an existing outdoor central heating appliance? Yes No

Outdoor central heating appliance allowed Yes No (not allowed in RI, R2, RM, RMH, or HR Zones)

Is it a Legal non-conforming outdoor wood stove? Yes No (not allowed to be replaced)

Is the outdoor central heating appliance in an interior side yard or a rear yard? Yes No

Is it a minimum of 50 feet away from the principal building? Yes No

Is it a minimum of 10 feet from any accessory structure or dwelling? Yes No

Is it a minimum of 35 feet away from all property lines? Yes No

Is height of the outdoor chimney at least 16 feet from the floor of the stove? Yes No

Are there any buildings on neighboring properties Within 50 feet? Yes No

If yes, then is the chimney at least 1 foot higher than the highest part of the building? Yes No

Is the chimney made of steel and equipped with a spark arrester? Yes No

Is the outdoor appliance's base constructed of concrete or other non-combustible material? Yes No

Manufacturer's instruction followed / a min. 18" in front and 12" clearances on the other side allowed? Yes No

Front yard Interior side yard Exterior side yard Rear yard Lot area

Minor variance required: Yes No

Approved for Permit: Date: Reviewed By:

Conditions or other Comments