



BUILDING BYLAW
 APPENDIX G – CONFIRMATION OF REQUIRED DOCUMENTATION

Building Permit Number: _____

Note:

1. *The Confirmation of Required Documentation and all required documentation must be submitted to the Building Inspector 48 hours prior to the Pre-Occupancy Coordinated Review.*
2. *The Confirmation of Required Documentation and all required documentation must be submitted in a tabbed ringed binder, with tab sections as per this Appendix.*

	Provided <input type="checkbox"/> N/A <input type="checkbox"/>	
TAB 1	<input type="checkbox"/> <input type="checkbox"/>	CONFIRMATION OF REQUIRED DOCUMENTATION
TAB 2	<input type="checkbox"/> <input type="checkbox"/>	DIRECTORY OF PRINCIPALS (Role/Firm/Name/Telephone)
	<input type="checkbox"/> <input type="checkbox"/>	Owner
	<input type="checkbox"/> <input type="checkbox"/>	Co-ordinating Registered Professional
	<input type="checkbox"/> <input type="checkbox"/>	Registered Professionals
	<input type="checkbox"/> <input type="checkbox"/>	Warranty Provided
	<input type="checkbox"/> <input type="checkbox"/>	Licensed Builder
	<input type="checkbox"/> <input type="checkbox"/>	Sub-Contractors
TAB 3	<input type="checkbox"/> <input type="checkbox"/>	LETTERS OF ASSURANCE (A, B, C-A, C-B)
	<input type="checkbox"/> <input type="checkbox"/>	Co-ordinating Registered Professional
	<input type="checkbox"/> <input type="checkbox"/>	Architectural
	<input type="checkbox"/> <input type="checkbox"/>	Structural
	<input type="checkbox"/> <input type="checkbox"/>	Mechanical
	<input type="checkbox"/> <input type="checkbox"/>	Plumbing
	<input type="checkbox"/> <input type="checkbox"/>	Electrical
	<input type="checkbox"/> <input type="checkbox"/>	Geotechnical Temporary
	<input type="checkbox"/> <input type="checkbox"/>	Geotechnical Permanent
	<input type="checkbox"/> <input type="checkbox"/>	Fire Suppression

- _____ (other)
 TAB 4 PROFESSIONAL REVIEW LETTERS
 Alternative Solution (Confirmation of Field Review – sealed)
 Site Services – Civil Engineer
 Building Envelope Specialist
 Roofing Consultant
 Generator Test Report / Certificate
 (Other - specify) _____
 (Other - specify) _____
- TAB 5 FIRE ALARM
 Fire Alarm Verification Certificate (include field work sheets)
 Letter of Signed Contract from ULC Listed Monitoring Agency
- TAB 6 SPRINKLER SYSTEMS
 Material and Test Certificate – Above ground piping
 Material and Test Certificate – Underground piping
 Fire Pump Test Report
- TAB 7 PROVINCIAL APPROVALS
 Certificate to Operate Elevating Device (one per each device)
 Health Approval (on-site sewage disposal)
 Health Approval (food services)
- TAB 8 TOWN APPROVALS
 Sprinkler Permit – Pre-occupancy Co-ordinated Review
 Fire Department Acceptance (Fire Safety Plan)
 Final Inspection (Building Inspector– pre-occupancy review)
 Developmental Engineering Final Inspection
 Planning Technicians Final Inspection
- TAB 9 DEFICIENCY LIST

Submitted by Coordinating Registered Professional

Name (PRINT)

Signature

Date

Address (PRINT)

Phone