



FOR OFFICE USE ONLY:
File No. <u>May 10, 2017</u>
Associated concurrent applications:

Applicant's checklist for tenant improvements/additions/change of use/change of major occupancy/reconstruction/renovations/repair/new construction

Please note this is a pre-application review only and NOT a Building Permit Application. We will evaluate your submission to verify if the application can be accepted. We will contact you within three (3) business days. **INITIALS:** _____

The following items must be fully completed and included in the Pre Application Package.

- | | |
|--------------------------|--|
| <input type="checkbox"/> | Checklist – top portion completed and *Note* initialed. |
| <input type="checkbox"/> | Application Form |
| <input type="checkbox"/> | Owner's Authorization – signed by both owner and agent |

APPLICANT

NAME(S): _____

COMPANY (IF APPLICABLE): _____

MAILING ADDRESS: _____

PHONE: _____ MOBILE: _____

E-MAIL: _____ FAX: _____

PROJECT ADDRESS

CIVIC ADDRESS: _____

PROJECT DESCRIPTION: _____

APPLICANT TO PROVIDE FOUR (4) SETS OF DRAWINGS (see page 1 of application)

N/A	Provided	Drawings:
		Architectural
		<i>Site Plan, I.D. your suite and identify suites adjacent</i>
		<i>Floor plan, 1/4" = 1'-0" include all dimensions</i>
		<i>Cross section including all construction details</i>
		Structural (or Comfort Letter)
		Mechanical
		Plumbing
		Fire Suppression (Performance Specification or Full Design Drawings)
		Electrical
		<i>Exit lighting</i>
		<i>Emergency lighting</i>
		<i>Pull station tie in to annunciator</i>
		<i>Reflected ceiling plan</i>
		Site Service / Civil

N/A	Provided	
		Geotechnical
		Landscaping
		Letters of Assurance, BC Building Code Schedules A & B:
		<i>Schedule A signed by Owner</i>
		<i>Architectural</i>
		<i>Structural (or Comfort Letter)</i>
		<i>Mechanical</i>
		<i>Plumbing</i>
		<i>Fire Suppression (Performance Specification or Full Design Drawings)</i>
		<i>Civil</i>
		<i>Electrical</i>
		<i>Geotechnical</i>
		<i>Soils Report</i>
		<i>Landscaping Schedules L1 / L2</i>

N/A	Provided	Other Documents
		<i>Value of all works</i>
		<i>Building Code analysis & Alternative Solution Proposals (if Applicable)</i>
		<i>Strata / Landlord Approval Letter or Owner's Authorization</i>
		<i>Fraser Health approval</i>
		<i>Copy of Land Title Search no more than 30 days old and all referenced documents, R.O.W.'s, Easements and Covenants</i>
		<i>Zoning analysis or required zoning at third reading prior to building permit application</i>
		<i>Development permit approval in principal prior to building permit application</i>
		<i>Site check scheduling to verify existing conditions</i>

Note the application **will not** be accepted until all required items are provided.

Permit Coordinator: _____

Contact Number: _____

Reviewed By: _____

Date: _____

Acceptable / Not Acceptable

(CIRCLE ONE OF THE ABOVE)



FOR OFFICE USE ONLY: May 10, 2017

File No. _____

Associated concurrent applications:

Tenant Improvement Application Form

Building Permits & Licences Division
Ground Floor, 32315 South Fraser Way
Abbotsford, BC V2T 1W7
Phone: 604-864-5525

COMPLETE **ALL** SECTIONS BELOW
** INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED **

I/WE hereby make application as follows:

1. APPLICATION TYPE: *(Check appropriate box)*

- Commercial
- Industrial
- Institutional
- Special Case - Residential Use

2. DESCRIPTION: *(Check appropriate box)*

- New
- Addition
- Renovation
- Restoration

2. PROJECT ADDRESS

CIVIC ADDRESS: _____

PROJECT DESCRIPTION: _____

4. ADDITIONAL INFORMATION: *(Check and complete appropriate box)*

- Development Permit Number _____
- Development Variance Permit Number _____
- Rezoning Number _____
- Subdivision Number _____

5. HAS CONSTRUCTION STARTED: *(Check and complete appropriate box)*

- Yes *(complete / explain the scope of work in detail:* _____

- No

COMPLETE **ALL** SECTIONS BELOW:

The APPLICANT information will be attached to all invoices, payments and refunds. If fees for this permit are to be paid by another party, please inform staff before proceeding (complete Refund Performance Section below)

APPLICANT

NAME: _____ CONTACT: _____

MAILING ADDRESS: _____

E-MAIL ADDRESS: _____ FAX: _____

PHONE: BUSINESS: _____ MOBILE: _____

PRIMARY CONTACT

NAME: _____ CONTACT: _____

MAILING ADDRESS: _____

E-MAIL ADDRESS: _____ FAX: _____

PHONE: BUSINESS: _____ MOBILE: _____

REFUND PERFORMANCE SECURITY DEPOSIT TO (if different from applicant)

NAME: _____ CONTACT: _____

MAILING ADDRESS: _____

E-MAIL ADDRESS: _____ FAX: _____

PHONE: BUSINESS: _____ MOBILE: _____

OWNER(S) (If applicant is not the registered owner, EITHER complete the following and attach an executed Owner's Authorization Form OR indicate the name of the future owner and attach a copy of the purchase agreement)

REGISTERED OWNER(S) of the Property

NAME: _____ CONTACT: _____

MAILING ADDRESS: _____

E-MAIL ADDRESS: _____ FAX: _____

PHONE: BUSINESS: _____ MOBILE: _____

Provide Contractor information as the City of Abbotsford requires that all businesses doing work here have a valid City of Abbotsford or Intermunicipal Business Licence.

CONTRACTOR INFORMATION

NAME: _____ CONTACT: _____

MAILING ADDRESS: _____

Do you have a Business Licence?

City of Abbotsford Business Licence (BL number) _____

Intermunicipal _____ (Issuing Municipality)

TENANT INFORMATION

NAME OF BUSINESS: _____

Is this a new tenant?

- Yes (Current Location)
- Yes (Previous Location) _____
- No

What is the proposed use?: _____

Do you have a Business Licence?

- Yes (BL number) _____
- No

FLOOR AREA

Area of _____ Floor (sq.ft.): _____

Area of _____ Floor (sq.ft.): _____

Area of _____ Floor (sq.ft.): _____

Area of Mezzanine (sq.ft.): _____

Total Floor Area (sq.ft.): _____

Is there a Sprinkler System?

- Yes
- No
- Existing
- Proposed
- Voluntary/Required

Will any Plumbing work be done?

- Yes (explain) _____
- No

Will any Electrical work be done?

- Yes (explain) _____
- No

Is there a Fire Alarm System?

- Yes
- No
- Existing
- Proposed
- Voluntary/Required

Heating Type: _____ Fuel: _____

Number of Drawings PER set: _____ Value of Construction: \$ _____

If you have any questions about this collection and use of your personal information, contact the Information and Privacy Coordinator at 604-864-5575 or FOI@abbotsford.ca City of Abbotsford, 32315 South Fraser Way, Abbotsford BC V2T 1W7

10. ACKNOWLEDGEMENT OF NOTICE OF COLLECTION OF PERSONAL INFORMATION

Personal information collected within this building permit and application file is collected for the purpose of processing this application and for administration and enforcement. The personal information is collected under the authority of the Local Government Act, the City's bylaws and Section 26 of the Freedom of Information and Protection of Privacy Act (the "Act"). Under the Act, personal information cannot be used or disclosed other than for the purpose for which it was collected, except with the consent of the individual whom the information is about or otherwise in accordance with law.

By signing this application I hereby consent that all information, including my personal information, within this building permit and application file, may be made available to the public upon request.

Signature of Applicant

Date