

Building Permit Application



**MID-WEST
PLANNING
DISTRICT**

1-888-919-1740
midwestplanning.ca

Permit Class: Residential Agricultural Commercial/Industrial

Property Information

Oakview Hamiota Prairie View Ellice-Archie **Roll Number:** _____
Civic Address: Number _____ Street/Road _____ Town _____
Urban: Lot _____ Block _____ Plan _____ **Rural:** NW SW NE SE Section _____ Township _____ Range _____ W
Frontage (ft): _____ **Total Property Area:** _____ **Lot Consolidated on Land Title:** No Yes

Proposed Project Information

Construct Dwelling Attached Garage Addition or Covered Deck Renovation Deck
 Detached Garage Accessory Building Other: _____

Description of Proposed Work including Proposed Building Use

***Project Value: \$** _____ Project Value means the total monetary value of the completed cost including all construction, material, and labour costs.
***Square Footage:** Basement _____ Main Floor _____ Second Floor _____ Addition _____
Garage _____ Deck _____ Open Covered Other _____
Total Height (From Grade) _____ Feet **No. of Storeys** _____ **Plumbing Fixtures/Drains:** No Yes (include a plumbing application)

Contact Information

Applicant Name(s) _____
Mailing Address _____ **Town/City** _____ **Postal Code** _____
Phone Number _____ **Email Address** _____

Registered Landowner(s) _____ Same as applicant
Contact Name (if Company Owned) _____
Mailing Address _____ **Town/City** _____ **Postal Code** _____
Phone Number _____ **Email Address** _____

Contractor/Builder Name: _____ **Company Name** _____ Same as applicant
Mailing Address _____ **Town/City** _____ **Postal Code** _____
Phone Number _____ **Email Address** _____

Architect/Engineer Name _____ **Company Name** _____ N/A Same as applicant
Mailing Address _____ **Town/City** _____ **Postal Code** _____
Phone Number _____ **Email Address** _____

Plumber Name _____ **Company Name** _____ N/A Same as applicant
Mailing Address _____ **Town/City** _____ **Postal Code** _____
Phone Number _____ **Email Address** _____

Please have the plumber fill out the Plumbing Permit Application and provide isometric drawings.

Spray Foam Installer Name _____ **Company Name** _____ N/A Same as applicant
Mailing Address _____ **Town/City** _____ **Postal Code** _____
Phone Number _____ **Email Address** _____

Please have the spray foam installer fill out the Spray Foam Information Form.

Note: A detailed site plan is required for all construction except for renovation work. A survey may be required for new construction. A digital or paper copy of blueprints must be supplied to this office before commencing construction and the blueprints will not be returned. Some projects require the stamp/seal of a professional engineer within one year of the completed application date. Other requirements may be applicable.

Additional Information Provided with this application:

- Company ownership Land title Survey/BLC Site Plan Letter of Assurance
- Building plans Foundation plans Roof system plans Floor system plans Renovation info form
- Deck info form Detached Garage info form Spray Foam Insulation info form

Declaration

I acknowledge that:

- 1) All statements and representations contained in this application for permit and the plans and specifications are correct, accurate, and adhere to any applicable legislation, by-laws, codes, and standards.
- 2) The issuance of a permit by the Mid-West Planning District does not waive, amend, or change any applicable by-laws or requirements contained in any other applicable legislation.
- 3) Any unauthorized changes from the plans and specifications or building location as specified in this application **shall** void the permit.
- 4) Owner/Applicant is responsible for searching any caveats registered on title.
- 5) I waive the rights of action against the Mid-West Planning District arising from this application and any permit issued. A permit shall expire if work authorized is not commenced within 6 months or authorized work is suspended for 6 months.
- 6) For administrative purposes, where information is missing or required to be included, authorization is granted to add information where required to complete this application.
- 7) The personal information I am providing is being collected under the authority of The Planning Act and will be used for the purpose of approving this application. It is protected by the Protection of Privacy provisions of The Freedom of Information and Protection of Privacy Act.

Applicant (print name) _____ **Signature** _____ **Date** _____

Landowner (print name) _____ **Signature** _____ **Date** _____

Methods of application submission:

Online application: https://midwestplanning.ca/portal_login/

Email forms to: devofficer@midwestplanning.ca

Mail forms to: Mid-West Planning District, Box 96, Miniota, MB R0M 1M0

Drop off forms at: Mid-West Planning District, 111 Sarah Avenue, Basement, Miniota, MB

Fees will be determined after receiving a completed application and are payable by cash, cheque, or e-transfer to devofficer@midwestplanning.ca