

RESIDENTIAL APPLICATION

BUILDING DIVISION inspections@langleycity.ca 604-514-2804

TYPE OF WORK PROPOSED

New House ☐ House with Suite ☐ Addition ☐ Renovations ☐ Secondary Suite ☐ Demolition ☐

LOCATION & PROPERTY INFORMATION

Construction Address: _____

Legal Description: Lot _____ DL _____ SEC _____ TWN _____ Plan _____

PEOPLE INFORMATION

Applicant (choose one): Owner/Builder ☐ Licensed Contractor: ☐ Business License # _____ HPO No. _____

Applicant Company Name: _____ Contact Person: _____

Phone: _____ Cell: _____ email: _____

Address: _____ City: _____ Province: _____ Postal: _____

Owner Name: _____ Contact Person Name: _____

Phone: _____ Cell: _____ email: _____

Address: _____ City: _____, Province: _____, Postal: _____

Contractor Company Name: _____, Contact Person: _____

Phone: _____ Cell: _____ email: _____

Address: _____ City: _____ Province: _____ Postal: _____

BUILDING DESCRIPTION

No. of floors _____ Area Main Floor: _____ Area Second Floor: _____ Area Finished Basement _____

Total Finished Area _____ Unfinished Floor Area _____ Secondary Suite Area: _____

Attached Garage Area _____ Sundeck Area _____ Sundeck with Roof Area _____

Heating: Forced Air ☐ Electric-Baseboard: ☐ Hot Water Radiant ☐ HW-Baseboard: ☐ Other ☐

New or Relocated Plumbing Fixtures: Toilets _____ Basins _____ Sinks _____ Dishwasher _____ Clothes Washer _____
Bath Tubs _____ Showers _____ HWT _____ FD _____ BFP _____ Hose Bib _____ Laundry Tubs _____ Other _____

Other than constructing a new building, please explain in details what you are doing: _____

_____ Construction Value: _____

I hereby make an application for a Building Permit in accordance with the information stated above and declare that the information provided is complete. In consideration of the granting of the permission applied for, I/we hereby agree to indemnify and keep harmless the City of Langley against all claims, liabilities, judgments, costs and expenses of whatsoever kind, which may in any way accrue against the said City in consequence of, and incidental to, the granting of this permit, and I/we agree to pay the cost of repairing any damage to the sidewalk and/or curb by reason of the building operations in respect of which this permit is applied for, and I/we further agree to conform to all requirements of the building by-law and all other statutes and bylaws in force in the City of Langley, and I/we further acknowledge that the City accepts no responsibility for the accuracy of the information contained herein. I understand that payment of fees or acceptance of application does not guarantee that a building will be issued.

Name of Applicant: _____	Signature: _____	Date: _____
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FOR OFFICE USE ONLY

Application Fee: \$ _____

Deposit: \$ _____

Application Reviewed By _____	Date: _____	Application No: _____
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Zone: _____ DP: _____ Land Use Contract: _____ Folio No.: _____

RESIDENTIAL APPLICATION CHECKLIST

The purpose of this checklist is to describe typical information and documentation which may be necessary when applying for a new Single Family Dwelling or addition application. The following list is not exhaustive and additional items not listed may be required at a later date.

Date: _____

Address _____

Req'd NA

<input type="checkbox"/>	<input type="checkbox"/>	Completed Building Permit Application Form
<input type="checkbox"/>	<input type="checkbox"/>	Two complete sets of Building Permit Drawings. (Refer to Single Family Dwelling Guide).
<input type="checkbox"/>	<input type="checkbox"/>	HPO form (available from BC Housing)
<input type="checkbox"/>	<input type="checkbox"/>	Form 1 – Owner's Acknowledgement Form
<input type="checkbox"/>	<input type="checkbox"/>	Agent Authorization Form (if Applicant is not the Owner)
<input type="checkbox"/>	<input type="checkbox"/>	Deposit Release Form
<input type="checkbox"/>	<input type="checkbox"/>	Title Certificate – (No more than 30 days old at time of application)
<input type="checkbox"/>	<input type="checkbox"/>	Building Scheme Design Approval (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	Engineered Truss layout (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	Sealed TJI layout (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	Topographical Survey - (Must be original; no older than 6 months). To show main floor elevation(s) of neighboring homes & grade elevations of adjacent lots.
<input type="checkbox"/>	<input type="checkbox"/>	Schedule "B" from Registered Professional(s)
<input type="checkbox"/>	<input type="checkbox"/>	Form 2 – Registered Professional's Proof of Insurance
<input type="checkbox"/>	<input type="checkbox"/>	Certificate of Insurance from Registered Professional
<input type="checkbox"/>	<input type="checkbox"/>	Rock Pit Design, sealed by a Registered Professional. (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	City Engineering approval – Site Servicing, MBE, Flood Construction Level, Lot Grading
<input type="checkbox"/>	<input type="checkbox"/>	Contractor's business license number