TOWNSHIP OF OTONABEE SOUTH MONAGHAN

SEWAGE SYSTEMS



Otonabee-South Monaghan Township

20 Third Street, Keene, Ontario, KOL2GO

Tel.: 705.295.6852 Fax: 705.295.6405

www.osmtownship.ca

Sewage Systems Forms & Permit Application

A sewage systems building permit is required to install a new septic system, repair, or replace any part of the septic system. The daily design flow news to be 10,000 litres/day or below for the entire site.

Sewage works is required if the daily design flow exceeds 10,000 litres/day for the entire site. An Environmental Compliance Certificate (ECA) is required from the Ministry of Environment, Conservations and Parks (MECP) for sewage works.

This guide and application is intended to be used for the design and building permit application associated with Class 2 (Greywater System), Class 3 (Cesspool), Class 4 (Leaching Bed System), or Class 5 (Holding Tank) sewage systems.

- **Class 1:** A sewage system used for the disposal of human body wastes (no added water) and includes all forms of privy. A building permit is not required for the construction of a Class 1 sewage system; however, there are Ontario building Code requirements for the construction of a Class 1 sewage system. Refer to the Ontario Building Code section 8.3 for detailed information.
- **Class 2:** A sewage system leaching pit used for the disposal of greywater (sink, tub, shower, and laundry waste with a maximum daily design greywater flow of 1000 litres/day).
- **Class 3:** A sewage system cesspool used for the disposal of human body waste from a Class 1 sewage system with a maximum daily design sanitary sewage flow of 1000 litres/day.
- **Class 4:** A sewage system which consists of a treatment unit of a leach bed system with a maximum daily design sanitary sewage flow of 10,000 litres/day.
- **Class 5:** A sewage system that utilizes a holding tank for the retention of on-site sanitary sewage with a maximum daily sanitary sewage flow of 10,000 litres/day and is transported off-site by a licensed sewage hauler.

This guide is for informational purposes only

Follow the steps that will guide you through the design process for the application and return the entire completed application guide with the required documentation listed below. It is the responsibility of the Applicant/Designer to review the building code to ensure all information is complete, accurate, and up to date.

New Construction and Full System Replacements:

A complete septic system application includes the following:

Completed Forms, required documents, and fees checklist:

Application to Construct or Demolish
Schedule 1: Designers Information signed by qualified systems designer.
Schedule 2: Septic Systems Installers Information signed by qualified installer.
Applicant Authorization Form is applicant is not the property owner.
Completed detailed Septic System summary, work sheets, site plan, and details.
Evaluated Percolation time ("T" time) from a licensed soil testing agency.
Building Materials Evaluation Commission (BMEC) or CAN/BNQ "Onsite Residential
Wastewater Treatment Technologies" approvals (if applicable).
Septic permit fee.

Building additions, renovations, and construction that affect the sewage system:

Modifications (additions, renovations, change of use) made to existing buildings may reduce the performance level of the sewage system in the following situations:

- The changes to the building result in an increase in occupant load which results in a new daily design sanitary sewage flow that exceeds the capacity of any component of the existing sewage system,
- The number of bedrooms in a dwelling or dwelling unit is increased,
- Proposed construction exceeds 15% of the finished (gross) area of the dwelling or dwelling unit,
- Additional (new) plumbing fixtures are added to the dwelling or dwelling unit,
- If the existing building's major occupancy is changed to another major occupancy through change of use.

If any of the above apply to your building project, applicants must submit a completed septic application to the Township of Otonabee-South Monaghan Building Department for review and approval prior to building.

Please contact the Township of Otonabee-South Monaghan Building Department if you have any questions or concerns regarding your new or existing sewage system.

NO PERSON SHALL CONSTRUCT A SEWAGE SYSTEM UNLESS A PERMIT HAS BEEN ISSUED BY APPROVAL OF THE CHIEF BUILDING OFFICIAL!

Reference chart for soil types, permeability and associated percolation "T" time.

Soil Type	Coefficient of Permeability K – cm/sec.	Percolation Time T – min./cm	Comment
G.W. Well graded gravels, gravel-sand mixtures, little or no fines	10-1	< 1	Very permeable - unacceptable
G.P. Poorly graded gravels, gravel-sand mixtures, little or no fines	10-1	< 1	Very permeable - unacceptable
G.M. Silty gravels, gravelsand mixture	10-2 - 10-4	4 - 12	Permeable to medium permeable based on amount of silt.
G.C. Clayey gravels, gravel-sand-clay mixtures	10 ⁻⁴ - 10 ⁻⁶	12 - 50	Important to estimate amount of silt and clay
S.W. Well graded sands, gravelly sands little or no fines	10 ⁻¹ - 10 ⁻⁴	2 - 12	Medium permeability
S.P. Poorly graded sands, gravelly sands little or no fines	10-1 - 10-3	2 - 8	Medium permeability
S.M. Silty Sands, sand-silt mixtures	10 ⁻³ - 10 ⁻⁵	8 - 20	Medium to low permeability
S.C. Clayey sands, sand- clay mixtures	10-4 - 10-6	12 - 50	Medium to low permeability based on amount of clay
M.L Inorganic silts & very fine sands, rock, flour, silty or clayey fine sands, clayey silts with slight plasticity	10 ⁻⁵ - 10 ⁻⁶	20 - 50	Medium to low permeability
C.L. Inorganic clays of low to medium permeability, gravelly clays, sandy clays, silty clays, lean clays	10 ⁻⁶ and less	Over 50	Unacceptable
O.L. Organic silts, organic silty clays of low plasticity, liquid limit less than 50	10 ⁻⁵ and less	20-over 50	Acceptable depends on clay content
M.H. Inorganic silts, micareaous or diatomageous fine sandy or silty soils, elastic silts	10 ⁻⁶ and less	Over 50	Unacceptable
C.H. Inorganic clays of medium to high plasticity, organic silts	10 ⁻⁷ and less	Over 50	Unacceptable
O.H. Organic clays of medium to high plasticity, organic silt, liquid limit over 50	10 ⁻⁶ and less	Over 50	Unacceptable

Section one: On-site Analysis

The information gathered through the test pit procedure will be used to complete the worksheets within this package and are to be completed for review and approval.

Test Pit Excavation Date:		
(Test pit to be a minimum	depth of 1.8m (6'-0")	

Applicant Use		
Depth (m)	Soil Type	"T" Time
0 - 0.3		
0 - 0.3 0.3 - 0.6		
0.6 - 0.9		
0.9 – 1.2		
1.2 – 1.5		
1.5 +		

(Soil Types and associated "T" times can be referenced from the previous chart.)

Sewage System Design Height:

Depth of Ground Water Table or bedrock depth determined through test pit =
Proposed minimum height of raised bed (where required):
Description of New or Existing Water Supply (check which applies):
□ Drilled well with 6m (19'-8") casing depth minimum.□ Dug well
□ Other:

There are two critical pieces of information that must be known in order to design a sewage system.

- 1. The amount of sewage entering the system that is generated from the building during a 24-hour period. This value is expressed as 'Q'.
- 2. The percolation rate. This value is expressed as 'T'.

The percolation rate means the average time in minutes that is required for water to drop one centimetre during a percolation test on-site or determined through soils analysis.

The sewage system daily design flows will be calculated using the charts provided in section two.

A building inspector will not design a sewage system.

The owner, authorized and qualified agent of the owner, qualified contractor/installer, qualified design consultant or professional engineer must provide the design of the sewage system.

Section Two: System Design and Worksheets

Sewage System Permit Summary / Overview					
Project Address:					
Applicable Law: (Documents provided with permit – check all applicable)					
☐ Conservation Authority Approval.					
☐ Source Water Protection.					
☐ Permit Application and Schedule One (Designer) and Two (Installer) forms completed.					
☐ Minor Variance Approval.					
☐ Site Plan Approval.					
☐ Grading Plans (for raised beds).					
☐ Construction in Hazard Lands.					
Building Occupancy Type:					
☐ Residential (Dwelling)					
☐ Residential (Other) specify:					
☐ Other Occupancy specify:					
Class of System:					
☐ Class 2 Sewage System – Greywater System					
☐ Class 3 Sewage System – Cesspool					
☐ Class 4 Sewage System – Leaching Bed System					
☐ Class 5 Sewage System – Holding Tank					
Sewage System Components:					
☐ Septic Tank Capacity (L):					
□ Pump Capacity (L):					
☐ Distribution Box					
☐ Other (please specify):					
☐ Advanced Treatment Unit Capacity (L):					
Manufacturer and Model:					
Method of Distribution Pipe Detection:					
☐ Magnetic Means					
☐ Tracer Wire (14 gauge TW solid copper light coloured plastic coated).					
☐ Other Means (please specify):					

For the design of a Class 4 System, complete the following summary chart and the associated worksheets for the chosen type of Class 4 sewage system.

Class	Class 4 System – complete summary selection for proposed system (A,B,C,D,E, or F)					
A: Ab	sorption Trench	B: Filter Bed		C: S	hallow Buried Trench	
	In-Ground	[In-Ground		☑ Type:
	Raised	ן נ		Raised		
	Leaching Chambers Type 1	ן נ		Effective Area:		■ Length of Chamber:
	Leaching Chambers Type 2					
	Total Pipe Length:	[Contact Area:		
	Mantle Required/Area:	[Leaching Chambers		
				Type 1		
		[Leaching Chambers		
				Type 2		
		[Total Pipe Length:		
		[Mantle		
				Required/Area:		
D: Advanced Treatment System		E: Type A Dispersal Bed:		F: T	ype B Dispersal Bed:	
(BME	C & CAN/BNQ):	Į (In-Ground		☐ In-Ground
•	C & CAN/BNQ): BMEC authorization	_		In-Ground Raised	_	☐ In-Ground ☐ Raised
•	•	ָן		_		
Ò	BMEC authorization	ָן		Raised		Raised
Ò	BMEC authorization provided	[Raised		Raised
`	BMEC authorization provided CAN/BNQ authorization	[Raised Length of Pipe:		Raised Stone Layer Area:
`	BMEC authorization provided CAN/BNQ authorization provided	(Raised Length of Pipe:		Raised Stone Layer Area: Linear Loading Rate
`	BMEC authorization provided CAN/BNQ authorization provided Service agreement provided	(Raised Length of Pipe: Mantle Area:		Raised Stone Layer Area: Linear Loading Rate 40L/m
`	BMEC authorization provided CAN/BNQ authorization provided Service agreement provided	(((Raised Length of Pipe: Mantle Area: Stone Layer Area:		Raised Stone Layer Area: Linear Loading Rate 40L/m Linear Loading Rate
	BMEC authorization provided CAN/BNQ authorization provided Service agreement provided Mantle Required/Area:	(((Raised Length of Pipe: Mantle Area: Stone Layer Area:		Raised Stone Layer Area: Linear Loading Rate 40L/m Linear Loading Rate
	BMEC authorization provided CAN/BNQ authorization provided Service agreement provided Mantle Required/Area:	(((Raised Length of Pipe: Mantle Area: Stone Layer Area:		Raised Stone Layer Area: Linear Loading Rate 40L/m Linear Loading Rate
	BMEC authorization provided CAN/BNQ authorization provided Service agreement provided Mantle Required/Area: Stone Layer Area:	(((Raised Length of Pipe: Mantle Area: Stone Layer Area:		Raised Stone Layer Area: Linear Loading Rate 40L/m Linear Loading Rate
	BMEC authorization provided CAN/BNQ authorization provided Service agreement provided Mantle Required/Area: Stone Layer Area:	(((Raised Length of Pipe: Mantle Area: Stone Layer Area:		Raised Stone Layer Area: Linear Loading Rate 40L/m Linear Loading Rate
	BMEC authorization provided CAN/BNQ authorization provided Service agreement provided Mantle Required/Area: Stone Layer Area: Sand Layer Area:	(((Raised Length of Pipe: Mantle Area: Stone Layer Area:		Raised Stone Layer Area: Linear Loading Rate 40L/m Linear Loading Rate
	BMEC authorization provided CAN/BNQ authorization provided Service agreement provided Mantle Required/Area: Stone Layer Area: Sand Layer Area: System Specifications	(((Raised Length of Pipe: Mantle Area: Stone Layer Area:		Raised Stone Layer Area: Linear Loading Rate 40L/m Linear Loading Rate

Worksheet A: Residential Dwelling - Daily Design Flow Calculations (Q)

A) Resident	ial Occupancy	(Q) Litres	Total
Number of	1 Bedroom	750	
Bedrooms	2 Bedrooms	1100	
	3 Bedrooms	1600	
	4 Bedrooms	2000	
	5 Bedrooms	2500	
		Subtotal (A)	

B) Plus Additional Flow for:

Note: Use the largest additional flow calculation to determine Daily Design Flow (Q). If none apply then Subtotal (B) = zero.

	` .	Quantity	(Q) Litres	Total		
Either	Each bedroom over 5		500			
Or	Floor space for each 10m ² over 200m ² up to 400m ²		100			
	Floor space for each 10m ² over 400m ² up to 600m ²		75			
	Floor space for each 10m ² over 600m ²		50			
Or	Each fixture unit over 20 fixture units		50			
	(Total of Worksheet B – 20 = Quantity)					
	Subtotal (B)					
	Subtotal A + B = Daily Design Flow (Q)					

Worksheet B: Residential Dwelling - Fixture Unit Count

Fixtures	Fixture	Quantity	Total
	Units		
Bath Group (Toilet w/flush tank, sink, tub or shower)	6.0		
Bathtub Only (with or without shower)	1.5		
Shower Unit/Stall	1.5		
Wash Basin / Lavatory (1.5" Dia. Trap)	1.5		
Water Closet (Toilet) Flush Tank	4.0		
Bidet	1.0		
Dishwasher (See notes)	1.0		
Floor Drain (3" Dia. Trap)	3.0		
Sink (single or double, or two singles with one trap)	1.5		
Domestic Washing Machine	1.5		
Combination Sink and Laundry Tray	1.5		
Garburator (See notes)			
Other:			
Total Nur	nber of Fi	xture Units	

Notes:

- 1. Bath group: A group of plumbing fixtures serving one room consisting of exactly one shower (single head) or bathtub, one lavatory (sink), and one water closet (toilet with flush tank). This would total seven (7) fixture units if added separately, but the Ontario Building Code provides a reduction for this grouping of plumbing fixtures.
- 2. Garburator: A domestic type of garbage disposal is permitted with no additional fixture unit load. A commercial type of garburator has a fixture load of 3.
- 3. Dishwasher: Only include dishwashers that are not connected to a domestic sink.
- 4. Refer to the Ontario Building Code Division B Table 7.4.9.3. for a complete listing of fixture types and fixture units.
- 5. Where laundry waste is not more than 20% of the total daily design flow, it may discharge to the sewage system. OBC 8.1.3.1.(2).
- 6. Sump pumps are not to be connected to the sewage system. Connection to a sewage system may lead to a hydraulic failure of the system.
- 7. Water softener and/or iron filter discharge may be directed to a sewage system provided the system has been designed to accept such discharge. Such discharge may lead to early failure of the system.

Worksheet C: Camp for the Housing of Workers

Camp for the Housing of Workers	Number of	(Q)	Total
	Employees	Litres	
Note: building size, number of bedrooms, and fixture counts are not required for a Camp for the Housing of Workers.		250	
	∣ Daily Design F	low (Q)	

Worksheet D: Other Occupancy Daily Design Flow Calculation (Q)

To calculate the daily design flow for other occupancies, refer to the Ontario Building Code Division B, Part 8 Table 8.2.1.3.B.

Establishment	Load Variable Ex. Number of seats, per floor area, number of employees, etc.	Volume Litres	Total
	Daily Design	Flow (Q)	

Worksheet E: Septic Tank Size

Note: The minimum septic tank size permitted by the Ontario Building Code is 3600 litres.

Occupancy Classification	Total Daily Design	Multiplied	Minimum Tank
	Flow (Q)	by Factor	Size (L)
Residential Occupancy		X2	
House, Apartment, Camp for the			
Housing of Workers.			
All other Occupancies		Х3	

Worksheet F and G: Leaching Bed Calculations for Class 4 Sewage Systems.

Part 1: Complete All Parts
Type of Leaching Bed (select one)
☐ Absorption Trench
☐ Filter Bed
☐ Shallow Buried Trench
☐ Advanced Treatment System
☐ Type A Dispersal Bed
☐ Type B Dispersal Bed
Percolation rate of native/underlaying soil ("T" min/cm):
Name of Licensed Soil Testing Agency:
☐ In-ground system
☐ Raised bed system
Height raised above original grade (metres):
Mantel (where applicable)
☐ Imported Fill
☐ Native Soil
Total expanded area in (metres squared): Q/Loading Rate:
(See OBC Div.B Part 8 Table 8.7.4.1.)
Total expanded area configuration (length x width in metres):

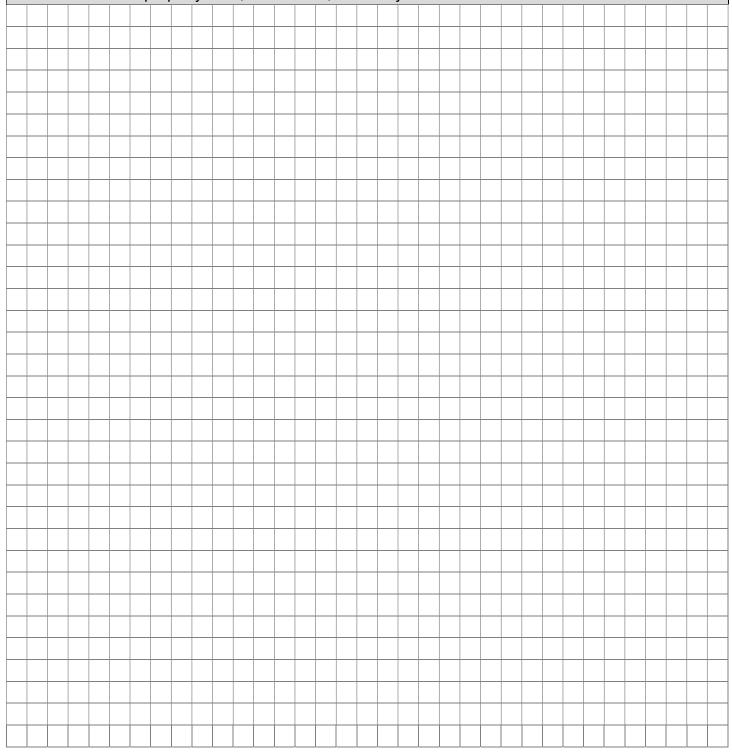
Worksheet G: Complete One of A, B, C, D, E, F to suit the sewage system proposed.

A. Absorption Trench C	onstruction				
Total length of the distribution	Conventional (QxT) ÷ 200 =m				
pipe	(Septic tank only – no advanced treatment system)				
	Type 1 Leaching Chambers (QxT) ÷ 200 =m				
	Type 2 Leaching Chambers (QxT) ÷ 300 =m				
	Configured as:runs ofm for a Totalm				
□ B. Filter Bed Constructi	on				
Effective Area	Effective area:(Q) ÷(75, 50, or 100) =m				
If Q ≤ 3000 litres per day use					
Q ÷ 75	Configured as:m xm				
If Q >3000 litres per day use Q					
÷ 50	Number of beds:				
Level II-IV treatment units use					
Q ÷ 100					
Distribution Pipe	Number of Runs:m				
Contact Area =	Contact Area: [(Q) x (T)] ÷ 850 =m ²				
(Q x T) ÷ 850					
Mantle (see Part 1)	Mantel Area:m ²				
□ C. Absorption Trench C	onstruction				
Percolation time (T) of soil in	Length of Total length of distribution pipe:				
minutes:	distribution (L)= (Q) \div (75, 50, 30) = m				
1 < T ≤ 20	pipe (metres):				
20 < T ≤ 50	Q ÷ 75 metres				
50 < T < 125	Q ÷ 50 metres				
	Q ÷ 30 metres				
□ D. Advance Treatment \$	System				
Provide BMEC or CAN/BNQ app	oroval and manufacturer's system design documents.				
☐ E. Type A Dispersal Bed					
Stone layer:	Stone layer				
If Q ≤ 3000 I/day use Q ÷ 75	$=$ (Q) \div (75 or 50) $=$ m ²				
If Q > 3000 I/day use Q ÷ 50					
Sand layer:	Sand layer				
1 < T ≤ 15 Use (Q x T) ÷ 850	$= [$ $(Q) \div (T)] \div (850 \text{ or } 400) = $ m^2				
T > 15 Use (Q x T) ÷ 400					
☐ F. Type B Dispersal Bed	<u> </u>				
Area = (Q x T) ÷ 400	Area = [(Q) x (T)] ÷ 400 = m ²				
Linear Loading Rate (LLR)	Pump chamber capacity =L				
T < 24 min. use 50 L/min.	Length (Q ÷ LLR) =m				
If T ≥ 24 min. use 40 L/min.	Bed configuration =m xm xm				
Distribution Pipe	Number of beds =				
	Configured as: runs of m Total: m				

Worksheet H: Sewage System Site Plan

Please provide the following information on this work sheet:

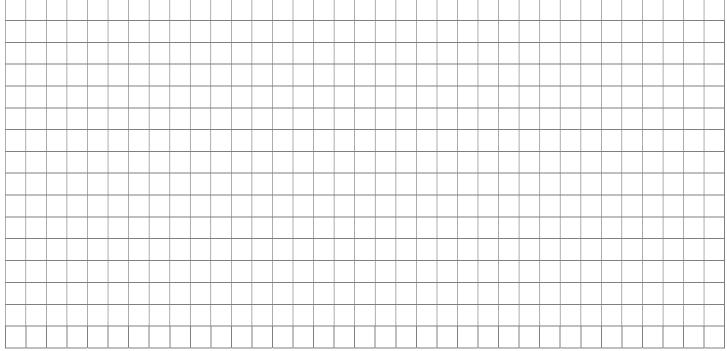
- Location of the sewage system and components (tank, leaching bed, pump chamber, etc.)
- Location of all buildings, pools, waterbody, wells on the property and adjacent properties.
- Locate and show minimum clearances for treatment units and distribution piping. Refer to Ontario Building Code, Division B. Table 8.2.1.6.A, 8.2.1.6.B, and 8.2.1.6.C
- Location of property lines, easements, and utility corridors.



Worksheet I: Cross Sectional Drawings

Cross sectional drawings are required for all sewage system designs.

- Location of existing grade
- Measurements to each component, distances to water table and/or bedrock
- Label each septic system component



Acknowledgement of Above Ground Electrical Conductors

Sentence 3.1.19.1. of the Ontario Building Code indicates that a building shall not be located beneath existing above ground electrical conductors and dictates the minimum horizontal clearances measured from the maximum conductor swing to a building as such:

- a) Be not less than 1m for electrical conductors carrying voltages 750V or less, except where necessary to connect the electrical wiring of the building;
- b) Be not less than 3m for electrical conductors carrying voltages greater than 750V but not exceeding 46kV;
- c) Be not less than 3.7m for electrical conductors carrying voltages greater than 46kV but not exceeding 69kV, or
- d) Conform to the requirements of CAN/CSA-C22.3 No.1, "Overhead Systems" for electrical conductors carrying voltages greater than 69kV.

The Ontario Building Code and Building Code Act defines a sewage system as a "Building". The following acknowledgement is to ensure that the location of the sewage system will meet OBC requirements for clearances from above ground electrical conductors.

Signature of Applicant:	Date:	

Application for a Permit to Construct or Demolish This form is authorized under subsection 8(1.1) of the Building Code Act, 1992

For use by Principal Autho	rity							
Application number: Peri			Permit n	Permit number (if different):				
Date received:				Roll nun	nber:			
Application submitted to:(N	lame of municipalit	ty, upper-tie	r munio	cipality, bo	ard of health or cor	nservatior	n authority)	
A. Project information								
Building number, street name							Unit number	Lot/con.
Municipality		Postal co	ode		Plan number/ot	her desc	cription	
Project value est. \$					Area of work (m	1 ²)		
B. Purpose of application								
New construction	Addition t existing bui			Alteration	n/repair		Demolition	Conditional Permit
Proposed use of building Current use of			nt use of	building				
Description of proposed work								
C. Applicant	Applicant is:	Owne		Au	thorized agent of			
Last name		First nan	ne		Corporation or p	partners	hip	
Street address							Unit number	Lot/con.
Municipality		Postal code		Province		E-mail		
Telephone number		Fax					Cell number	
D. Owner (if different from	applicant)							
Last name		First nan	ne		Corporation or p	partners	hip	
Street address		1					Unit number	Lot/con.
Municipality		Postal co	ode		Province		E-mail	
Telephone number		Fax					Cell number	

E. Builder (optional)							
Last name	First name	Corporation or partners	hip (if applica	able)			
Street address			Unit numbe	r	Lot/con.		
on our address			Onic Hambo	'	2000011.		
Municipality	Postal code	Province	E-mail	E-mail			
Telephone number	Fax		Cell numbe	r			
relephone number	гах		Cell Hullibe	ı			
F. Tarion Warranty Corporation (Ontario	New Home Warrant	y Program)					
 i. Is proposed construction for a new hom Plan Act? If no, go to section G. 	e as defined in the <i>Ont</i> a	rio New Home Warranties		Yes	No		
ii. Is registration required under the <i>Ontar</i>	io New Home Warranties	s Plan Act?		Yes	No		
iii. If yes to (ii) provide registration number	(e)·				-		
G. Required Schedules	(3)						
i) Attach Schedule 1 for each individual who rev	riews and takes respons	bility for design activities.					
ii) Attach Schedule 2 where application is to con	•	-					
H. Completeness and compliance with a	pplicable law						
i) This application meets all the requirements of clauses 1.3.1.3 (5) (a) to (d) of Division C of the Building Code (the application is made in the correct form and by the owner or authorized agent, all applicable fields have been completed on the application and required schedules, and all required schedules are submitted).							
Payment has been made of all fees that are required, under the applicable by-law, resolution or regulation made under clause 7(1)(c) of the <i>Building Code Act, 1992</i> , to be paid when the application is made. Yes No							
ii) This application is accompanied by the plans and specifications prescribed by the applicable by-law, resolution or regulation made under clause 7(1)(b) of the <i>Building Code Act, 1992.</i>							
iii) This application is accompanied by the information and documents prescribed by the applicable by-law, resolution or regulation made under clause 7(1)(b) of the <i>Building Code Act, 1992</i> which enable the chief building official to determine whether the proposed building, construction or demolition will contravene any applicable law.							
iv) The proposed building, construction or demol	ition will not contravene	any applicable law.		Yes	No		
I. Declaration of applicant							
••							
I(print name)				decla	are that:		
 The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership. 							
Date	Signature of	applicant					

Personal information contained in this form and schedules is collected under the authority of subsection 8(1.1) of the *Building Code Act, 1992*, and will be used in the administration and enforcement of the *Building Code Act, 1992*. Questions about the collection of personal information may be addressed to: a) the Chief Building Official of the municipality or upper-tier municipality to which this application is being made, or, b) the inspector having the powers and duties of a chief building official in relation to sewage systems or plumbing for an upper-tier municipality, board of health or conservation authority to whom this application is made, or, c) Director, Building and Development Branch, Ministry of Municipal Affairs and Housing 777 Bay St., 2nd Floor. Toronto, M5G 2E5 (416) 585-6666.

Schedule 1: Designer Information

Use one form for each individual who reviews and takes responsibility for design activities with respect to the project.

A. Project Information		·		
Building number, street name			Unit no.	Lot/con.
Municipality	nicipality Postal code Plan number/ other description			
B. Individual who reviews and takes	responsibilit	y for design activities		
Name		Firm		
Street address			Unit no.	Lot/con.
Municipality	Postal code	Province	E-mail	
Telephone number	Fax number		Cell number	
C. Design activities undertaken by in Division C]	ndividual iden	ntified in Section B. [Buil	ding Code Table	3.5.2.1. of
House	Пнуас	C – House	Building Str	uctural
Small Buildings		ng Services	Plumbing –	House
Large Buildings		tion, Lighting and Power		All Buildings
Complex Buildings	Fire P	rotection	On-site Sev	vage Systems
Description of designer's work				
D. Declaration of Designer				
1		de	clare that (choose o	ne as appropriate):
(print name	∍)			
I review and take responsibility C, of the Building Code. I am qu				
Individual BCIN:	· 		· -	•
Firm BCIN:			_	
I review and take responsibility	for the design a	nd am qualified in the approp	riate category as an	"other designer"
under subsection 3.2.5.of Divisi	on C, of the Buil	lding Code.		
Individual BCIN:			_	
Basis for exemption from re	egistration:			
The design work is exempt fron	ո the registratior	n and qualification requiremer	nts of the Building Co	ode.
Basis for exemption from re	∍gistration and c	qualification:		
I certify that:				
 The information contained in this schedule is true to the best of my knowledge. 				
I have submitted this application w	ith the knowledg	ge and consent of the firm.		
Date		Signature of Designer		
Date		Signature or Designer		

NOTE:

- 1. For the purposes of this form, "individual" means the "person" referred to in Clause 3.2.4.7(1) (c).of Division C, Article 3.2.5.1. of Division C, and all other persons who are exempt from qualification under Subsections 3.2.4. and 3.2.5. of Division C.
- 2. Schedule 1 is not required to be completed by a holder of a license, temporary license, or a certificate of practice, issued by the Ontario Association of Architects. Schedule 1 is also not required to be completed by a holder of a license to practise, a limited license to practise, or a certificate of authorization, issued by the Association of Professional Engineers of Ontario.

Schedule 2: Sewage System Installer Information

A. Project Information							
Building number, street name			Unit number	Lot/con.			
Municipality	Postal code	Plan number/ other descr	ription				
B. Sewage system installer							
Is the installer of the sewage system engaged in the business of constructing on-site, installing, repairing, servicing, cleaning or emptying sewage systems, in accordance with Building Code Article 3.3.1.1, Division C? Yes (Continue to Section C) No (Continue to Section E) Installer unknown at time of application (Continue to Section E)							
C. Registered installer information	n (where answ	er to B is "Yes")					
Name	•	-	BCIN				
Street address			Unit number	Lot/con.			
Municipality	Postal code	Province	E-mail				
Telephone number	Fax		Cell number				
D. Qualified supervisor information	on (where answ	ver to section B is "Yes"	")				
Name of qualified supervisor(s) Building Code Identification Number (BCIN)							
E. Declaration of Applicant:							
I declare that:							
(print name)							
I am the applicant for the permit to construct the sewage system. If the installer is unknown at time of application, I shall submit a new Schedule 2 prior to construction when the installer is known;							
<u>OR</u>							
I am the holder of the permit to construct the sewage system, and am submitting a new Schedule 2, now that the installer is known.							
I certify that:							
 The information contained in this schedule is true to the best of my knowledge. 							
2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.							
Date Signature of applicant							