



**MUNICIPALITY OF BRIGHTON**  
67 Sharp Road, Brighton, ON, K0K 1H0  
613-475-1162  
[www.brighton.ca](http://www.brighton.ca)

## **SEPTEMBER 2020**

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## **GENERAL INFORMATION FOR A DEMOLITION PERMIT**

A building permit is required to demolish an existing building or structure greater than 108 sq.ft. (10 m<sup>2</sup>). A Demolition Permit is not required for the demolition of farm buildings such as barns and silos.

## **THE FOLLOWING ITEMS MUST BE INCLUDED WITH AN APPLICATION FOR A DEMOLITION PERMIT.**

1. **APPLICATION FOR PERMIT TO CONSTRUCT OR DEMOLISH** (Completed in full and signed).
2. **DEMOLITION SCOPE OF WORK** sheet (Completed in full and signed).
3. **SITE PLAN** - Location of structure(s) with dimensions to all property lines. The structure being demolished will need to be clearly outlined/circled to distinguish it.
4. **COPY OF REGISTERED SURVEY** (if applicable).
5. **PERMIT FEE SUMMARY** sheet with payment of \$205.00  
Cheque made payable to the "Municipality of Brighton".

## **LOWER TRENT CONSERVATION AUTHORITY**

Due to all the low lying lands within the Municipality, check with LTCA to see if you require a permit and have the response in writing when submitting the demolition permit application. Note this is particularly important if you are planning to rebuild in the location of the proposed demolition. LTCA may possibly consider this as one permit rather than two when located near a watercourse, lake, stream, pond, canal, wetland, etc. or an erosion sensitive area or steep slopes. Call 613-394-3915 or email: [information@ltc.on.ca](mailto:information@ltc.on.ca) LTCA office located at: 714 Murray Street, Trenton, ON, K8V 5P4.

**Permit applications must be submitted with a MINIMUM OF 2 WEEKS PRIOR TO DEMOLITION.**

# Application for a Permit to Construct or Demolish

This form is authorized under section 8(1.1) of the *Building Code Act, 1992*

| <b>For use by Principle Authority</b>  |                               |                                |                               |
|--|-------------------------------|--------------------------------|-------------------------------|
| Application number:  | Permit number (if different): |                                |                               |
| Date received:   | Roll number:                  |                                |                               |
| Application submitted to: <b>MUNICIPALITY OF BRIGHTON</b><br><small>(Name of municipality, upper-tier municipality, board of health or conservation authority)</small>   |                               |                                |                               |
| <b>A. Project information</b>  |                               |                                |                               |
| Building number, street name   |                               | Unit number                    | Lot /con.                     |
| City/Town  | Province                      | Postal code                    | Plan number/other description |
| Project value est. \$  |                               | Area of work (m <sup>2</sup> ) |                               |
| <b>B. Purpose of application</b>   |                               |                                |                               |
| <input type="checkbox"/> New Construction <input type="checkbox"/> Addition to an existing building <input type="checkbox"/> Alteration/repair <input type="checkbox"/> Demolition <input type="checkbox"/> Conditional Permit |                               |                                |                               |
| Proposed use of building   |                               | Current use of building        |                               |
| Description of proposed work   |                               |                                |                               |
| <b>C. Applicant</b> Applicant is: <input type="checkbox"/> Owner OR <input type="checkbox"/> Authorized Agent of Owner   |                               |                                |                               |
| Last name  | First name                    | Corporation or partnership     |                               |
| Street address   |                               | P.O. Box                       | Lot/con.                      |
| City/Town  | Province                      | Postal code                    | E-mail                        |
| Telephone number   | Fax                           |                                | Cell number                   |
| <b>D. Owner (if different from applicant)</b>  |                               |                                |                               |
| Last name  | First name                    | Corporation or partnership     |                               |
| Street address   |                               | P.O. Box                       | Lot/con.                      |
| City/Town  | Province                      | Postal code                    | E-mail                        |
| Telephone number   | Fax                           |                                | Cell number                   |

|  |  |                        |                              |  |
|--|--|------------------------|------------------------------|--|
| <b>E. Builder (optional)</b> <input type="checkbox"/> Same as Applicant  |  |                        |                              |  |
| Last name  |  | First name             |                              | Corporation or partnership (if applicable) |
| Street address   |  |                        | P.O. Box                     | Lot/con.                                   |
| City/Town  |  | Province               | Postal code                  | E-mail                                     |
| Telephone number   |  | Fax                    |                              | Cell number                                |
| <b>F. Tarion Warranty Corporation (Ontario New Home Warranty Program)</b>  |  |                        |                              |  |
| i. Is proposed construction for a new home as defined in the <i>Ontario New Home Warranties Plan Act</i> ? If no, go to section G.   |  |                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No                |
| ii. Is registration required under the <i>Ontario New Home Warranties Plan Act</i> ?   |  |                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No                |
| iii. If 'yes' to (ii) provide registration number(s): _____  |  |                        |                              |  |
| <b>G. Required Schedules</b>   |  |                        |                              |  |
| i) Attach Schedule 1 for each individual who reviews and takes responsibility for design activities.   |  |                        |                              |  |
| ii) Attach Schedule 2 where application is to construct on-site, install or repair a sewage system.  |  |                        |                              |  |
| <b>H. Completeness and compliance with applicable law</b>  |  |                        |                              |  |
| 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).<br>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. |  |                        | <input type="checkbox"/> Yes | <input type="checkbox"/> 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> .  |  |                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No                |
| 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.  |  |                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No                |
| iv) The proposed building, construction or demolition will not contravene any applicable law.  |  |                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No                |
| <b>I. Declaration of applicant</b>   |  |                        |                              |  |
| I, _____ declare that:<br>(print name)   |  |                        |                              |  |
| 1. The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation 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 |                              |  |

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 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.



## Demolition Scope of Work

| <b>Project Location:</b>     |          |             |                                 |
|------------------------------|----------|-------------|---------------------------------|
| Building number, Street name | Lot      | Concession  |                                 |
| City/Town                    | Province | Postal code | Plan number / other description |

| <b>General Information:</b> |  |   |  |
|-----------------------------|--|---|--|
| Current Use of Building:    | <input type="checkbox"/> Existing Residential Building | <input type="checkbox"/> Existing Accessory Building                                      |  |
| No. of Storey's:            | Age of Building: _____ years                           | Gross Floor Area: <input type="checkbox"/> m <sup>2</sup> <input type="checkbox"/> Sq.Ft. |  |

| <b>Pre-Demolition Procedures:</b>  |                              |                              |  |
|--|------------------------------|------------------------------|--|
| <p>The following are utilities that may be servicing the building. Please check the appropriate box. If 'yes' is checked for any of the following, it is verifying that these utilities have been or will be disconnected and/or cap the services. Contact Ontario One Call Locates at: 1-800-400-2255</p> |                              |                              |  |
| Hydro One (Electricity) 1-888-664-9376   | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |  |
| Enbridge / Union Gas 1-888-774-3111  | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |  |
| Propane Supplier   | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |  |
| Cable Supplier   | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |  |
| Telephone Supplier   | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |  |
| Water Disconnect/Shut-off  | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |  |
| Sanitary Disconnect  | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |  |

| <b>Demolition to proceed as follows:</b> |   |
|--|---|
| <input type="checkbox"/> N/A             | <input type="checkbox"/> Ensure there is no asbestos present on site                                  |
| <input type="checkbox"/> N/A             | <input type="checkbox"/> Ensure any fuel oil tanks on site are emptied and then transported to: _____ |
| <input type="checkbox"/> N/A             | <input type="checkbox"/> Demolition of structure using: _____   |
| <input type="checkbox"/> N/A             | <input type="checkbox"/> Remove and haul garbage and wood debris to a licensed receiver: _____        |
| <input type="checkbox"/> N/A             | <input type="checkbox"/> Remove large chunks of foundation and transport to: _____                    |
| <input type="checkbox"/> N/A             | <input type="checkbox"/> Break up and crush remaining concrete floor and walls with _____             |
| <input type="checkbox"/> N/A             | <input type="checkbox"/> Place crushed concrete at bottom of foundation or _____                      |
| <input type="checkbox"/> N/A             | <input type="checkbox"/> Grade the area and cover with topsoil  |
| <input type="checkbox"/> N/A             | <input type="checkbox"/> Seed leveled area to make good site  |

| <b>Declaration:</b>   |           |       |
|---|-----------|-------|
| <p>I/We hereby declare that the structure at the above mentioned location is vacant. The Application for a Permit to Construct or Demolish with a Site Plan is included with this Scope of Work. As the Owner or Authorizing Agent, will arrange with the proper authorities for the termination and capping of all services and utilities and will conduct the demolition in a true and proper manner.</p> |           |       |
| _____   | _____     | _____ |
| Print Name  | Signature | Date  |

## 2020 - PERMIT FEE SUMMARY

**Inspection cancellation fee within 24 hours** (when inspection has been booked and works are not complete) = **\$50.00**

Revisions to Plans after Building Permit is issued \$123.00

Revisions to plans after permit issued, non-residential per sq.ft. of revised building area \$0.10 per sq.ft.

| PROPERTY ROLL # | ADDRESS OF CONSTRUCTION | LOCATION (Con., Lot, Part, Plan) |
|-----------------|-------------------------|----------------------------------|
| 1408            |                         |                                  |

| PROPERTY OWNER | ADDRESS | PHONE / EMAIL / CELL |
|----------------|---------|----------------------|
|                |         |                      |

| BUILDER'S NAME | ADDRESS | PHONE / EMAIL / CELL |
|----------------|---------|----------------------|
|                |         |                      |

**NEW - RESIDENTIAL**

|  |  |                          |    |
|--|--|--------------------------|----|
| 1st FLOOR                                    | <input style="width: 80%;" type="text"/> | sq.ft.                   |    |
| 2nd FLOOR                                    | <input style="width: 80%;" type="text"/> | sq.ft.                   |    |
| FINISHED BASEMENT                            | <input style="width: 80%;" type="text"/> | sq.ft.                   |    |
| (Including finished basement) <b>TOTAL</b>   |  | <b>sq.ft. @ \$1.00 =</b> | \$ |
| <b>GARAGE</b>                                |  | <b>sq.ft. @ \$0.65 =</b> | \$ |
| <b><u>NEW RESIDENTIAL BUILDING TOTAL</u></b> |  |                          | \$ |

**NEW - COMMERCIAL & INSTITUTIONAL** AREA of  sq.ft. x \$1.15 / sq.ft. = \$

**NEW - INDUSTRIAL** AREA of  sq.ft. x \$0.50 / sq.ft. = \$

**RENOVATIONS & ALTERATIONS - RESIDENTIAL** (minimum \$150.00)  
 \$8.00 per \$1000.00 of Building Value of Construction = Value of \$  x \$8.00 / \$1,000 = \$

**RENOVATIONS - COMMERCIAL & INSTITUTIONAL** (minimum \$200.00)  
 \$14.00 per \$1000.00 of Building Value of Construction = Value of \$  x \$14.00 / \$1,000 = \$

**RENOVATIONS - INDUSTRIAL** (minimum \$200.00)  
 \$8.00 per \$1000.00 of Building Value of Construction = Value of \$  x \$8.00 / \$1,000 = \$

**ACCESSORY BUILDING** (minimum \$150.00) AREA of  sq.ft. x \$0.65 / sq.ft. = \$

**AGRICULTURAL - OPTION 1 or 2** (minimum \$150.00)

(1) \$100.00 PLUS \$0.30 per sq.ft. of - AREA of  sq.ft. x \$0.30 + \$100.00 = \$

(2) \$100.00 PLUS \$9.00 per \$1000.00 of Contract Building Value - Value of \$  x \$9.00 / \$1,000 + \$100.00 = \$

**BUILDING TOTAL - from above** \$

## 2020 - PERMIT FEE SUMMARY

BUILDING TOTAL (carried from page 1)

\$

**DEMOLITION PERMITS - \$205.00**

\$ \_\_\_\_\_

**CHANGE OF USE PERMITS** (minimum \$200.00)

\$10.00 per \$1000.00 of Building Value of Construction = Value of \$ \_\_\_\_\_ x \$10.00 / \$1000. = \$ \_\_\_\_\_

**DECKS or POOLS** (or other structures not specified herein) - **\$160.00**

\$ \_\_\_\_\_

**TEMPORARY BUILDING or TRAILER** - **\$100.00 per 3 month period** (minimum \$300.00)

\$ \_\_\_\_\_

**OCCUPANCY PERMIT** - **\$119.00**

\$ \_\_\_\_\_

**PLUMBING PERMIT FEE** - (\$150.00 plus \$17.00 per fixture) **TOTAL PLUMBING PERMIT FEE**  
(calculated from County of Northumberland Plumbing Permit Application)

\$

**SERVICES FEES - MUNICIPAL**

Entrance Permit: \$500.00 \$ \_\_\_\_\_

(Entrance Permit includes Blue Rural Civic Address Plate (911 sign)

Blue Rural Civic Address Plate (911 sign) @ \$50.00 \$ \_\_\_\_\_

Urban: Water Service (Infilling lots - confirm rates with municipality) \$ \_\_\_\_\_

Urban: Sanitary Service (Infilling lots - confirm rates with municipality) \$ \_\_\_\_\_

Water Meter - **5/8 inch** - @ **\$225.00** \$ \_\_\_\_\_

Initial Water Turn on/Inspection Fee **\$60.00** (additional fee \$60.00 per trip) \$ \_\_\_\_\_

**TOTAL SERVICES FEES**

\$

**DEVELOPMENT CHARGES – SEPT. 3, 2020 TO SEPT. 2, 2021 PER UNIT**

| <u>NEW HOMES</u>                           | <u>URBAN</u> | <u>RURAL</u> |
|--|--------------|--------------|
| Single Detached / Semi Dwelling (Per Unit) | \$10,530.00  | \$ 8,537.00  |
| Row / Other Multiples (Per Unit)           | \$ 8,737.00  | \$ 7,083.00  |
| Apartment (2+ bedrooms)                    | \$ 7,518.00  | \$ 6,094.00  |
| Apartment (Bachelor & 1 bedroom)           | \$ 5,524.00  | \$ 4,478.00  |
| Commercial - Non-Residential (per Sq. ft.) | \$ 6.33      | \$ 5.05      |

\$

**BUILDING / LOT GRADING DEPOSIT FOR NEW DWELLINGS** - **\$2,000.00**

(REFUNDABLE) NO DEPOSIT REFUNDS AFTER THE 2nd ANNIVERSARY  
OF DATE IF ISSUANCE OF THE BUILDING PERMIT - BL # 484-2007

\$

**TOTAL PERMIT FEE PAYABLE**

\$