

# Application for a Permit to Construct or Demolish

This form is authorized under subsection 8(1.1) of the Building Code Act

For use by Principal Authority	
Application number: <b>08 188280 BLD 00 SR</b>	Permit number (if different):
Date received: <b>Jul 30, 2008</b>	Roll number: <b>1904062610033000000</b>

Application submitted to: **City of Toronto**

District Offices:

North York 416-395-7000  Toronto and East York 416-392-7539  Scarborough 416-396-7526  Etobicoke York 416-394-8002

A. Project information			
Building number, street name <b>582 RICHMOND ST W</b>		Unit number	Lot/con.
Municipality <b>TORONTO</b>	Postal code <b>M5V 1Y9</b>	Plan number/other description <b>MIL RES PT 10 SECTION C</b>	
Project value est. \$ <b>10,000</b>	Area of work (m <sup>2</sup> ) <b>0.00</b>		

B. Applicant			
Applicant is: <input type="checkbox"/> Owner or <input checked="" type="checkbox"/> Authorized agent of owner			
Last name <b>BROCKSTEIN</b>	First name <b>STEVE</b>	Corporation or partnership <b>TRIBUTE PORTLAND LIMITED</b>	
Street address <b>1815 IRONSTONE MANOR</b>		Unit number Unit 1	Lot/con.
Municipality <b>PICKERING</b>	Postal code <b>L1W 3W9</b>	Province <b>ON</b>	E-mail
Telephone number <b>(905) 839-3500(W)</b>	Fax <b>(905) 839-3757</b>	Cell number <b>(416) 818-4036</b>	


C. Owner (if different from applicant)			
Last name <b>RESENDES</b>	First name <b>LIVIA</b>	Corporation or partnership	
Street address <b>582 RICHMOND ST W</b>		Unit number	Lot/con.
Municipality <b>TORONTO</b>	Postal code <b>M5V 1Y9</b>	Province <b>ON</b>	E-mail
Telephone number	Fax	Cell number	

D. Builder (optional)			
Last name	First name	Corporation or partnership (if applicable)	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number	Fax	Cell number	

E. Purpose of application	
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition to an existing building
<input checked="" type="checkbox"/> Alteration/repair	<input type="checkbox"/> Demolition
<input type="checkbox"/> Conditional Permit	
Proposed use of building <b>SFD</b>	Current use of building <b>SFD</b>
Description of proposed work <b>Small Residential Projects, SFD - Townhouse, Other(SR) Proposal to make good of existing party wall due to the demo of 580 Richmond St W. SFD</b>	

F. Tarion Warranty Corporation (Ontario New Home Warranty Program)	
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 checked="" type="checkbox"/> No
ii. Is registration required under the <i>Ontario New Home Warranties Plan Act</i> ?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
iii. If yes to (ii) provide registration number(s):	

G. Attachments	
i. Attach documents establishing compliance with applicable law as set out in Article 1.4.1.3. of Division A.	
ii. Attach Schedule 1 for each individual who reviews and takes responsibility for design activities.	
iii. Attach Schedule 2 where application is to construct on-site, install or repair a sewage system.	
iv. Attach types and quantities of plans and specifications for the proposed construction or demolition that are prescribed by the by-law, resolution, or regulation of the municipality, upper-tier municipality, board of health or conservation authority to which this application is made.	

H. Declaration of applicant	
I, <u>STEVE BROCKSTEIN</u> certify that:	
(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. I have authority to bind the corporation or partnership (if applicable).	
Date <u>07/30/2008</u>	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.

06/07/05