



Township of  
**Leeds** and the  
**Thousand Islands**

# Demolition

## Building Permit Application and Information Guide

### **Municipal Office**

1233 Prince Street  
P.O. Box 280  
Lansdowne, Ontario  
K0E 1L0  
Phone: 613-659-2415  
[www.leeds1000islands.ca](http://www.leeds1000islands.ca)

### **Office Hours**

Mon – Fri 9:00 am – 4:30 pm

### **Inspections**

[buildinginspections@  
townshipleeds.on.ca](mailto:buildinginspections@townshipleeds.on.ca)

### **General Inquiries and Application Submission**

Building Assistant  
Ext. 206  
[buildingassistant@  
townshipleeds.on.ca](mailto:buildingassistant@townshipleeds.on.ca)

### **Building Code Inquires**

Chief Building Official  
Ext. 210  
[cbo@townshipleeds.on.ca](mailto:cbo@townshipleeds.on.ca)

# Building Permit Application Checklist

## Items Required for a Complete Building Application Submission

- ☐ Completed Application
- ☐ Copy of Deed (if not registered owner on file)
- ☐ Owner/Authorized Agent Responsibility Form
- ☐ Demolition Affidavit (attached)
- ☐ Confirmation of Utility Disconnection Form (attached)
- ☐ Agent Authorization Form (required if the property owner is not submitting the application)
- ☐ Plot Plan demonstrating the location of the structure to be demolished. (see sample attached). A plot plan may be hand drawn but it must be clear and drawn to scale.
- If the proposal includes the reconstruction of the structure on the same footprint, please also include:
    - Approval from the Township Planner advising that the structure can be rebuilt on the same footprint. The Planner will require the following:
      - a detailed plot plan
      - The height of the structure (measured from the highest peak to the lowest grade)
      - Photographs of the existing structure
    - A building permit may be required for the reconstruction
- ☐ Engineers design of Part 3 building demolitions (Buildings larger than 600m<sup>2</sup>)
- ☐ Payment of the applicable administration fees. Forms of payment taken at the Office are cash, cheque or debit only. Credit cards are not accepted.
- Standard Demolition Fee
  - Administration Fee = \$150

# 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:		Permit number (if different):	
Date received:		Roll number:	
Application submitted to: <b><u>The Township of Leeds and the Thousand Islands</u></b>			
A. Project information			
Building number, street name		Unit number	Lot/con.
Municipality	Postal code	Plan number/other description	
Project value est. \$		Area of work (m <sup>2</sup> )	
B. Purpose of application			
<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			
C. Applicant			
Applicant is: <input type="checkbox"/> Owner or <input type="checkbox"/> Authorized agent of owner			
Last name	First name	Corporation or partnership	
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 name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number (     )	Fax (     )	Cell number (     )	

E. 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 (      )	
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 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): _____				
G. Required Schedules				
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.				
H. Completeness and compliance with applicable law (See the attached guide for assistance)				
i) This application meets all the requirements of clauses 1.3.1.3 (5) (a) to (d) of Division C of the Building Code ( <b>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</b> ).			<input type="checkbox"/> Yes	<input type="checkbox"/> No
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) <b>This application is accompanied by the plans and specifications prescribed</b> 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) <b>This application is accompanied by the information and documents prescribed</b> 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
I. Declaration of applicant				
I _____ declare 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. 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.

## Applicable Law Requirements

### J. Email Authorization

- ☐ All contacts with email addresses provided in this application have agreed to their email addresses being added to the Municipality's Contact List.

### K. Heritage Designation (for alterations, repair, renovation, demolition projects only)

Has this property been designated under the Ontario Heritage Act? ☐ Yes ☐ No

### L. Agricultural Operation – New or Expansion of a Livestock Facility

Is this application for a ☐ new or ☐ expanded livestock facility? ☐ Yes ☐ No

If yes, have you provided the Minimum Distance Separation Calculation or Nutrient Management Plan? ☐ Yes ☐ No

### M. Agency Approvals

**Cataraqui Region Conservation Authority** approval required if construction is within the regulatory boundary defined by the CRCA. ☐ Yes ☐ No

**St. Lawrence Parks Commission** approval required if the construction is within 150 feet of, or fronts or backs onto, the 1000 Islands Parkway. ☐ Yes ☐ No

**Ministry of Transportation** approval required if construction is within the MTO area of control. ☐ Yes ☐ No

**Leeds, Grenville and Lanark District Health Unit** approval is required if the new proposal relates to food services. ☐ Yes ☐ No

**Other Agency** Indicate Agency: \_\_\_\_\_ ☐ Yes ☐ No

### N. Entrance Permit Approval

An approved Entrance Permit from the applicable road authority is required to be submitted with the application for any property that is vacant and being developed or if a new entrance is proposed to access the new construction. This does not include private lanes. ☐ Yes ☐ No

### O. Civic Address Approval – Required prior to the Issuance of a Building Permit

Does this property have a civic address? If no, please contact staff for an application form. ☐ Yes ☐ No

Does this property have a blue civic address blade installed on the property? If no, one must be purchased upon the issuance of the building permit. Installation of the blade/post on site is required prior to the first inspection. ☐ Yes ☐ No

### P. Owner's Authorization

I, \_\_\_\_\_ am the owner of the land that is subject to this application for a building permit and I authorize \_\_\_\_\_ to make this application on my behalf.

Date: \_\_\_\_\_ Signature of Owner(s): \_\_\_\_\_

### \*\*Important Information\*\*

**The Municipality notifies the following agencies concerning the approval of your building permit:**

- Municipal Property Assessment Corporation
- Statistics Canada
- Leeds, Grenville and Lanark District Health Unit
- Canada Mortgage and Housing

**It is your responsibility to notify the following agencies concerning the approval of your building permit and obtain all required permits from their office prior to starting construction.**

- Tarion New Home Warranty (New Dwellings)
- Electrical Safety Authority (All project involving electrical)
- Ministry of Labour (projects valued \$50,000 and greater)

**\*\* Failure to submit any of the required information may result in the application being returned. \*\***

### Records of Site Condition O.Reg. 153/04

When a property is being proposed for a more sensitive land use than its current or most recent use then a Record of Site Condition (RSC) per the Environmental Protection Act (EPA) is required prior to land use change.

Please indicate ('x') if the lands in respect of which the building permit application is made have been used for any of the following uses:

<b>X</b>	<b>Potentially Contaminating Activity</b>	<b>X</b>	<b>Potentially Contaminating Activity</b>
	Acid and Alkali Manufacturing, Processing and Bulk Storage		Importation of Fill Material of Unknown Quality
	Adhesives and Resins Manufacturing, Processing and Bulk Storage		Ink Manufacturing, Processing and Bulk Storage
	Airstrips and Hangars Operation		Iron and Steel Manufacturing and Processing
	Antifreeze and De-icing Manufacturing and Bulk Storage		Metal Treatment, Coating, Plating and Finishing
	Asphalt and Bitumen Manufacturing		Metal Fabrication
	Battery Manufacturing, Recycling and Bulk Storage		Mining, Smelting and Refining; Ore Processing; Tailings Storage
	Boat Manufacturing		Oil Production
	Chemical Manufacturing, Processing and Bulk Storage		Operation of Dry Cleaning Equipment (where chemicals are used)
	Coal Gasification		Ordnance Use
	Commercial Autobody Shops		Paints Manufacturing, Processing and Bulk Storage
	Commercial Trucking and Container Terminals		Pesticides (including Herbicides, Fungicides and Anti-Fouling Agents) Manufacturing, Processing, Bulk Storage and Large-Scale Applications
	Concrete, Cement and Lime Manufacturing		Petroleum-derived Gas Refining, Manufacturing, Processing and Bulk Storage
	Cosmetics Manufacturing, Processing and Bulk Storage		Pharmaceutical Manufacturing and Processing
	Crude Oil Refining, Processing and Bulk Storage		Plastics (including Fibreglass) Manufacturing and Processing
	Discharge of Brine related to oil and gas production		Port Activities, including Operation and Maintenance of Wharves and Docks
	Drum and Barrel and Tank Reconditioning and Recycling		Pulp, Paper and Paperboard Manufacturing and Processing
	Dye Manufacturing, Processing and Bulk Storage		Rail Yards, Tracks and Spurs
	Electricity Generation, Transformation and Power Stations		Rubber Manufacturing and Processing
	Electronic and Computer Equipment Manufacturing		Salt Manufacturing, Processing and Bulk Storage
	Explosives and Ammunition Manufacturing, Production and Bulk Storage		Salvage Yard, including automobile wrecking
	Explosives and Firing Range		Soap and Detergent Manufacturing, Processing and Bulk Storage
	Fertilizer Manufacturing, Processing and Bulk Storage		Solvent Manufacturing, Processing and Bulk Storage
	Fire Retardant Manufacturing, Processing and Bulk Storage		Storage, maintenance, fuelling and repair of equipment, vehicles, and material used to maintain transportation systems
	Fire Training		Tannery
	Flocculants Manufacturing, Processing and Bulk Storage		Textile Manufacturing and Processing
	Foam and Expanded Foam Manufacturing and Processing		Transformer Manufacturing, Processing and Use
	Garages and Maintenance and Repair of Railcars, Marine Vehicles and Aviation Vehicles		Treatment of Sewage equal to or greater than 10,000 litres per day
	Gasoline and Associated Products Storage in Fixed Tanks		Vehicles and Associated Parts Manufacturing
	Glass Manufacturing		Waste Disposal and Waste Management, including thermal treatment, landfilling and transfer of waste, other than use of biosoils as soil conditioners
			Wood Treating and Preservative Facility and Bulk Storage of Treated and Preserved Wood Products

## Schedule 1: Designer Information

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

<b>A. Project Information</b>				
Building number, street name			Unit no.	Lot/con.
Municipality	Postal code	Plan number/ other description		
<b>B. Individual who reviews and takes responsibility for design activities</b>				
Name		Firm		
Street address			Unit no.	Lot/con.
Municipality	Postal code	Province	E-mail	
Telephone number (     )	Fax number (     )	Cell number (     )		
<b>C. Design activities undertaken by individual identified in Section B. [Building Code Table 3.5.2.1. of Division C]</b>				
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> House  <input type="checkbox"/> Small Buildings  <input type="checkbox"/> Large Buildings  <input type="checkbox"/> Complex Buildings </div> <div style="width: 30%;"> <input type="checkbox"/> HVAC – House  <input type="checkbox"/> Building Services  <input type="checkbox"/> Detection, Lighting and Power  <input type="checkbox"/> Fire Protection </div> <div style="width: 30%;"> <input type="checkbox"/> Building Structural  <input type="checkbox"/> Plumbing – House  <input type="checkbox"/> Plumbing – All Buildings  <input type="checkbox"/> On-site Sewage Systems </div> </div>				
Description of designer's work				
<b>D. Declaration of Designer</b>				
<p>I _____ declare that (choose one as appropriate):</p> <p style="text-align: center;">(print name)</p> <p><input type="checkbox"/> I review and take responsibility for the design work on behalf of a firm registered under subsection 3.2.4. of Division C, of the Building Code. I am qualified, and the firm is registered, in the appropriate classes/categories.</p> <p style="margin-left: 40px;">Individual BCIN: _____</p> <p style="margin-left: 40px;">Firm BCIN: _____</p> <p><input type="checkbox"/> I review and take responsibility for the design and am qualified in the appropriate category as an "other designer" under subsection 3.2.5. of Division C, of the Building Code.</p> <p style="margin-left: 40px;">Individual BCIN: _____</p> <p style="margin-left: 40px;">Basis for exemption from registration: _____</p> <p><input type="checkbox"/> The design work is exempt from the registration and qualification requirements of the Building Code.</p> <p style="margin-left: 40px;">Basis for exemption from registration and qualification: _____</p> <p>I certify that:</p> <ol style="list-style-type: none"> <li>1. The information contained in this schedule is true to the best of my knowledge.</li> <li>2. I have submitted this application with the knowledge and consent of the firm.</li> </ol> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 30%; text-align: center;">             _____              Date </div> <div style="width: 60%; text-align: center;">             _____              Signature of Designer </div> </div>				

**NOTE:**

1. For the purposes of this form, "individual" means the "person" referred to in Clause 3.2.4.7(1) d). 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.

## Plot Plan

**\*\*Required for all new construction and demolitions\*\***

All structures and buildings in the Municipality must conform to the Township's Zoning By-Law as it is applicable law. In order to ensure that the proposed structure is in compliance with the Zoning By-Law, a complete plot plan with the following information is required for review:

### Plot Plan Check List - Property Information

<input type="checkbox"/> Dimensions of the property	<input type="checkbox"/> Dimensions and area of existing and proposed structures
<input type="checkbox"/> Location of existing or proposed septic system and well	<input type="checkbox"/> Height of the proposed structure
<input type="checkbox"/> Approximate location of all natural and artificial features	<input type="checkbox"/> Name of any road/private right-of-way within or abutting property

### From the nearest point of the new construction:

<input type="checkbox"/> Setbacks to centerline of adjacent roads	<input type="checkbox"/> Distance to the high water mark (if applicable)
<input type="checkbox"/> Distance to the edge of adjacent right-of-ways	<input type="checkbox"/> Distance to all property lines
	<input type="checkbox"/> Distance from accessory structure to main use

☐ Check here if the Plot Plan is on a separate piece of paper and is attached to this application.

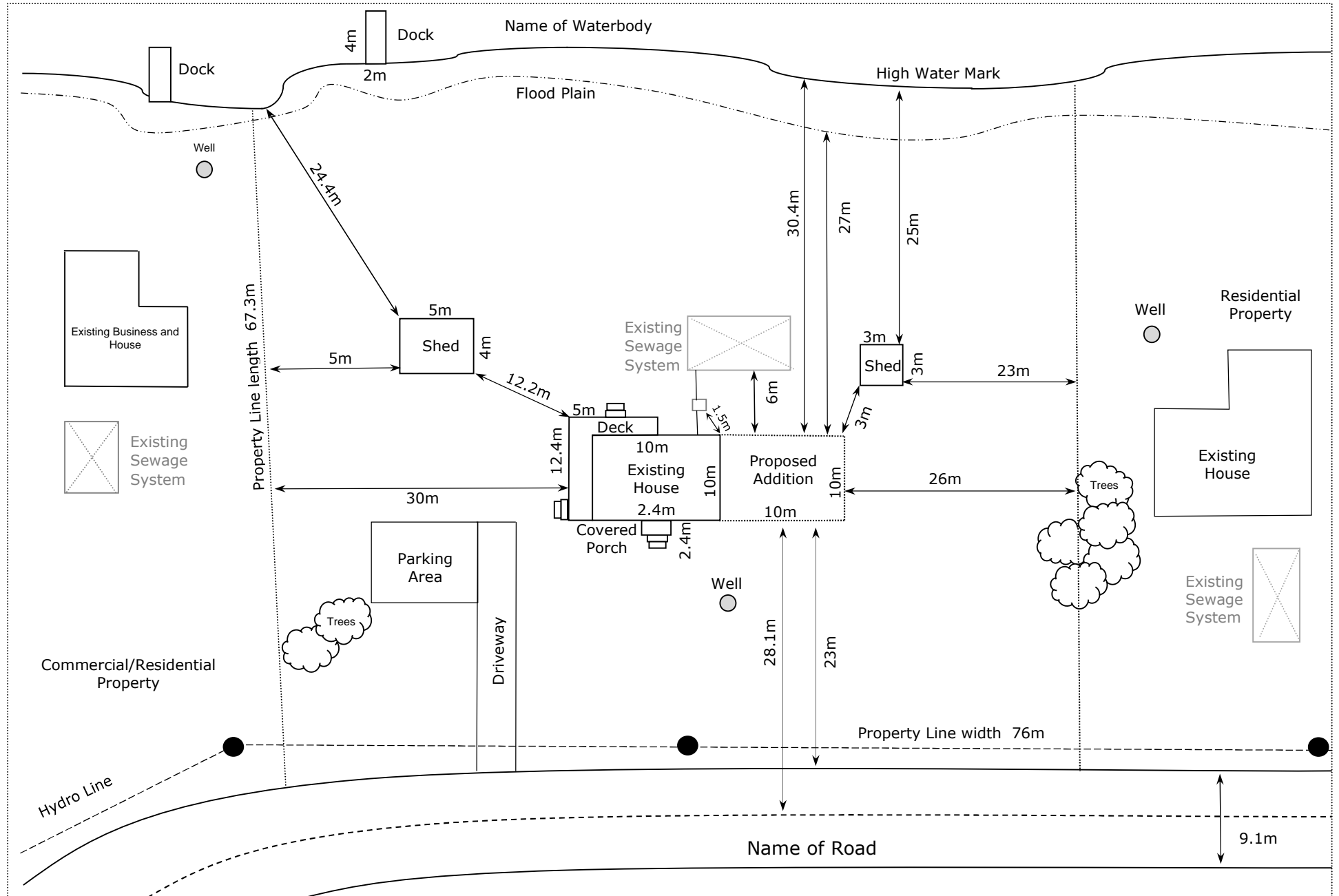
New Construction is to be a minimum of ☐ 5 ft from septic tank ☐ 17 ft from tile bed  
☐ 16 ft from hydro lines. Please Indicate the distances on the plot plan.

Address of Property:

Owner:



# Sample Plot Plan





Township of Leeds and the Thousand Islands  
1233 Prince St, PO Box 280  
Lansdowne, ON K0E 1L0  
Phone: 613-659-2415

## **Affidavit**

### **Demolition Materials**

Owner(s): \_\_\_\_\_

Authorized Agent(s): \_\_\_\_\_

Civic Address of Demolition Site: \_\_\_\_\_

Demolition Project: \_\_\_\_\_

I, \_\_\_\_\_ swear that I am the owner of the above property, or the authorized agent (letter required from owner). I further agree that any materials connected to demolition of the above project will be disposed of in accordance with any Township Bylaws, MECP regulations and will commence only after receiving all required approvals and permits. I also agree that all demolition will be completed in accordance with all applicable law, including but not limited to legislation regulated by TSSA, MECP and ESA. I understand that approval to demolish does not constitute any right to rebuild.

\_\_\_\_\_  
Signature of Owner or Approved Agent

\_\_\_\_\_  
Date



Township of  
**Leeds** and the  
**Thousand Islands**

Township of Leeds and the Thousand Islands  
1233 Prince St, PO Box 280  
Lansdowne, ON K0E 1L0  
Phone: 613-659-2415

## **Confirmation of Utility Disconnection**

Owner(s): \_\_\_\_\_

Authorized Agent(s): \_\_\_\_\_

Civic Address of Demolition Site: \_\_\_\_\_

Demolition Project: \_\_\_\_\_

I, \_\_\_\_\_, the owner/authorized agent of owner of the land that is subject of this demolition permit for the Township of Leeds and the Thousand Islands confirm that arrangements have been made with the proper authorities for the disconnection of all services including water, sewer, gas, electric, telephone or other utilities and services.

\_\_\_\_\_  
Signature of Owner or Approved Agent

\_\_\_\_\_  
Date