



Making a Difference Together

## Demolition - Deconstruction Permit Application

Hold  
NoPermit  
No.

**SOUTHERN GULF ISLANDS  
WILLIS POINT & MALAHAT  
BUILDING INSPECTION**  
Mail to: P.O. Box 1000 (625 Fisgard Str.)  
Victoria, BC, V8W 2S6  
(250)360-3230 FAX (250)360-3232  
Toll Free: 1-866-475-1581

**JUAN DE FUCA  
BUILDING INSPECTION**  
3-7450 Butler Rd.  
Sooke, BC V9Z 1N1  
(250)642-8109 FAX (250)642-5274

**SALT SPRING ISLAND  
BUILDING INSPECTION**  
206 - 118 Fulford Ganges Rd.  
Salt Spring Island, BC, V8K 2S4  
(250)537-2711 FAX (250)537-96

**PENDER ISLAND  
BUILDING INSPECTION**  
PO BOX 1000  
VICTORIA BC V8W 2S6  
(250)360-3230

PLEASE PRINT CLEARLY

Pursuant to the regulations applicable to the CAPITAL REGIONAL DISTRICT:

I, \_\_\_\_\_ Address \_\_\_\_\_ Being the owner or representing the owner

hereby make application to DEMOLISH or DECONSTRUCT \_\_\_\_\_ located at:  
single family dwelling, accessory buildings, etc

Site address: \_\_\_\_\_  
House Number Street

Reason for Demolition \_\_\_\_\_ Age of Building \_\_\_\_\_

LEGAL DESCRIPTION

FOLIO No. \_\_\_\_\_

Lot \_\_\_\_\_ Section \_\_\_\_\_ Block \_\_\_\_\_ Plan No. \_\_\_\_\_ District \_\_\_\_\_

**Other Pertinent Information**

Owner \_\_\_\_\_ Address \_\_\_\_\_ # \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

Contractor \_\_\_\_\_ Address \_\_\_\_\_ # \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

All work relating to this application, including rendering sewage disposal system safe, and providing a safe demolition site shall meet the requirements of the Capital Regional District and the British Columbia Building Code and be completed by \_\_\_\_\_

**LIMITATION OF LIABILITY**

Neither the issuance of a permit under this bylaw nor the acceptance or review of plans, drawings or specifications or supporting documents, nor any inspections made by or on behalf of the Capital Regional District shall in any way relieve the owner or his or her representatives from full and sole responsibility to perform the work in full accordance with the British Columbia Building Code, the Building Regulation Bylaw of the CRD and all other applicable enactments, codes, and standards.

**FREEDOM OF INFORMATION WAIVER**

Personal Information contained on this form is collected under the authority of the Local Government Act and is subject to the Freedom of Information and Protection of Privacy Act. The personal information will be used for purposes of issuing this permit. Enquiries about the collection or use of information on this form can be directed to the appropriate building inspection office listed at the top of this appendix.

All building in the Capital Regional District Electoral Areas is regulated by Building Regulation Bylaw No. 3741.

Telephone Number \_\_\_\_\_

Date \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

**FEE SCHEDULE**

Check one of the following	Demolition Fee	Deconstruction Fee	Totals	Payment received by way of cheque <input type="checkbox"/> cash <input type="checkbox"/> date _____
<input type="checkbox"/> Buildings up to 400 square feet in area	\$ 100.00	\$ 0.00		
<input type="checkbox"/> Buildings over 400 square feet in area	\$ 200.00	\$ 0.00		
<input type="checkbox"/> Rendering private sewage disposal system safe	\$ 21.00	\$ 21.00		
<input type="checkbox"/> Cap building sewer	\$ 16.00	\$ 16.00		
<b>Total Permit Fee</b>				