



Making a Difference Together

Demolition - Deconstruction Permit Application

Hold
No.Permit
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 own

 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
<input type="checkbox"/> Buildings up to 400 square feet in area	\$ 42.00	\$ 21.00	
<input type="checkbox"/> Buildings over 400 square feet in area	95.00	47.00	
<input type="checkbox"/> Rendering private sewage disposal system safe	21.00	21.00	
<input type="checkbox"/> Cap building sewer	16.00	16.00	
Total Permit Fee			

Payment received by way of

cheque cash

date _____