

Date Plans Submitted:

Y	Y	Y	Y	M	M	D	D
				/			/

Government Services

SUBJECT: Request for Approval of Plans

Description of Proposed Development

1 New Extension To Existing Upgrading Of Existing Change of Occupancy (no construction required)

2 Fee Schedule

If no construction is being carried out fee is nil

2

No construction _____ no fee
 Buildings less than 250 m² in total floor area _____ \$ 50
 Buildings greater than 250 m² and less than 600 m² in total floor area _____ \$200
 Buildings greater than 600 m² in total floor area _____ \$400

**Approval fee must accompany application.
Make cheque or money order payable to Newfoundland Exchequer Account.**

3 Structure Information

3

Name of Structure _____

Location _____

Name of Architect _____

Name of M & E Engineering firm _____

Name of Designer (other than above) _____

Name of Agency Issuing Building Permit _____

Have plans been submitted To this agency? Yes No

Part of NBCCC - Current Edition Under which building has been designed? Part 3 Part 9

4 Building Classification

4

Occupancy _____

Group A B C D E F Division 1 2 3 4

NBCC _____

5 Type of Construction

5

Noncombustible Combustible Combination of Both

NBCC _____

6 Building Area - as defined

6

Area of basement, cellar, crawl space	Area of the first story
Area of the second story	Area of third or other stories
Building height; grade to top of floor of highest story	Is building considered a high rise? Yes <input type="checkbox"/> No <input type="checkbox"/>
NBCC _____	

7 Building Faces (Note: Indicate Streets and Parking Areas on Site Plan)

7

One street Two streets Three streets Four streets

NBCC _____

Occupant Load

(indicate specific areas as per classification and allowable square feet per person, upon which occupant load is calculated. Indicate total number of persons in each area. Life safety code should be used in this calculation.)

8

NBCC

Exposed Building Face

9

Limiting Distance Allowed	Maximum Allowable % Unprotected Openings
Distance To Nearest Building	Any Windows or Doors Exposed in Between Buildings? Yes <input type="checkbox"/> No <input type="checkbox"/>
NBCC	

Building Serviced With:

10

Municipal Water System? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Type: Wet <input type="checkbox"/> Dry <input type="checkbox"/> Deluge <input type="checkbox"/> None <input type="checkbox"/>	Water Supply For Firefighting Hydrant <input type="checkbox"/> Natural <input type="checkbox"/> Static <input type="checkbox"/>
Distance to Nearest Hydrant(s)	

Floor Assembly

11

Construction	
Fire Resistance Rating	Any Unprotected Vertical Openings? Yes <input type="checkbox"/> No <input type="checkbox"/>
NBCC	

Roof Assembly

12

Construction	
Underside Fire Resistance Rating	
NBCC	

Fire Resistance Rating

13

	Fire Resistance Rating	Construction
Ceilings and Walls	_____	_____
Load Bearing Walls	_____	_____
Columns and Arches	_____	_____
Fire Separations	_____	_____
Mezzanines	_____	_____
Furnace Rooms	_____	_____
Electrical Rooms	_____	_____
Flammable Liquid Storage Rooms	_____	_____
NBCC		

Fire Compartments

14

Area over 500 sq. Meters	Area over 1000 sq. Meters
NBCC	

Fire Walls

15

Construction	
Fire protection rating	Height of parapet above roof
NBCC	

Interior Finish (Walls And Ceiling)

16

Prime construction	Final coating or covering used
NBCC	

Exits And Access To Exits. Areas Based On:

17

Number of persons as determined by capacity Factor as per: Chapter 7 NFPA 101 Life Safety Code	
Horizontal Exits Yes <input type="checkbox"/> No <input type="checkbox"/>	
Maximum travel to exits based on _____ Meters	Width of corridors used to access exits _____ Meters
Number of units of exit Required per floor area	Type of hardware On exit doors
Size of smoke barrier doors	
NBCC	

Interior Fire Protection

18

	Yes	No	Type	Class	Size
Standpipes	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Automatic Fire Extinguishing Systems	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Fire Extinguishers	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Fire Alarm Systems	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Emergency Lights	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Exit Lights	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Smoke Detectors	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Smoke Alarms	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Panic Hardware	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Other (please Specify)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

Heating system

19 Electrical <input type="checkbox"/> Oil <input type="checkbox"/> Solid fuel <input type="checkbox"/>	Type of System
Type of chimney Masonry <input type="checkbox"/> Prefab <input type="checkbox"/>	Duct type smoke detectors In warm air circulating systems? Yes <input type="checkbox"/> No <input type="checkbox"/>

Ventilation & air conditioning system

20 Fire damper requirement Yes <input type="checkbox"/> No <input type="checkbox"/>	
Smoke detection requirements Yes <input type="checkbox"/> No <input type="checkbox"/>	
Air circulating fan automatic shutdown Yes <input type="checkbox"/> No <input type="checkbox"/>	

Provisions for disabled provided

21 Compliance with applicable NL Regulations Yes <input type="checkbox"/> No <input type="checkbox"/>	
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Additional requirements for high building

22 Building height _____ Meters	Venting system Yes <input type="checkbox"/> No <input type="checkbox"/>
Pressurized areas Yes <input type="checkbox"/> No <input type="checkbox"/>	Elevator requirements Yes <input type="checkbox"/> No <input type="checkbox"/>
	Voice communication System Yes <input type="checkbox"/> No <input type="checkbox"/>

Fire stopping

23 Fire stopping in accordance with requirements of National Building Code of Canada? Yes <input type="checkbox"/> No <input type="checkbox"/>	
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F-1 Classification

24 Flammable or combustible liquid storage Yes <input type="checkbox"/> No <input type="checkbox"/>	
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Code checks

25 Life safety code check made Yes <input type="checkbox"/> No <input type="checkbox"/>	National fire code of Canada check made Yes <input type="checkbox"/> No <input type="checkbox"/>	Applicable standards and codes adopted check made Yes <input type="checkbox"/> No <input type="checkbox"/>
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Detailed explanation, if required

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Please Print Clearly in Ink

28

This is to certify that this form has been completed to the best of my ability and that the building or part of the building identified herein has been designed and will be constructed in accordance with the provisions of the latest edition of the National Building Code, National Fire Code of Canada and the Life Safety Code.

Name	Title																
Address																	
Postal Code	Telephone																
Signature <div style="border: 1px solid black; height: 60px; width: 100%; margin-top: 5px;"> _____ </div>	Seal of Professional Designer <div style="border: 1px solid black; height: 150px; width: 100%; margin-top: 5px;"></div>																
Date <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> <td>M</td><td>M</td> <td>D</td><td>D</td> </tr> <tr> <td colspan="4"> </td> <td colspan="2">/</td> <td colspan="2">/</td> </tr> </table>	Y	Y	Y	Y	M	M	D	D					/		/		
Y	Y	Y	Y	M	M	D	D										
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Please return completed form to one of the following Government Service Centre offices.

29

ST. JOHN'S 5 Mews Place Telephone: (709) 729-1038 Facsimile: (709) 729-2071	HARBOUR GRACE 7-9 Roddick Crescent Telephone: (709) 945-3107 Facsimile: (709) 945-3114	CLARENVILLE 8 Myers Avenue, Suite 201 Telephone: (709) 466-4060 Facsimile: (709) 466-5674	
GANDER Fraser Mall Telephone: (709) 256-1420 Facsimile: (709) 256-1438	GRAND FALLS-WINDSOR 9 Queensway Telephone: (709) 292-4206 Facsimile: (709) 292-4528	CORNER BROOK The Noton Building Riverside Drive Telephone: (709) 637-2369 Facsimile: (709) 637-2681	HAPPY VALLEY-GOOSE BAY Thomas Building 13 Churchill Street Telephone: (709) 896-5428 Facsimile: (709) 896-4340

PRIVACY NOTICE

The Engineering and Inspection Services Division of the Department of Government Services, collects Personal Information relating to Fire and Life Safety under the authority of the Fire Prevention Act. Personal information collected by the Government of Newfoundland and Labrador is protected under the Access to Information and Privacy (ATIPP) Act. If you have any questions about the collection or use of this information, please contact a Government Service Centre representative at your nearest Department of Government Services office.

General Notes and Requirements**30**

1. This form shall be completed where the project design requirements are under Part 3 of the National Building Code of Canada. This includes all buildings that are greater than 600 square meters in building area, and/or used for the Assembly (Group A) and/or Care (Group B) of the public or is considered High Hazard Industrial (Group F-1).
2. This form must be fully completed, stamped and signed by the Professional Designer (Architect or Engineer) responsible for the design.
3. A copy of this form shall be retained by the applicant for future reference.
4. This application form and three copies of the drawings shall be forwarded to the local Government Service Centre office. One copy of this form and one copy drawings shall be forwarded to the local Municipal Council. An Approval in Principal letter from the Town Clerk or Manager shall be included with all submitted applications. Where no Municipal Council exists, the information may be submitted directly to the local Government Service Centre.
5. Applications made to the Government Service Centre must be accompanied by the appropriate fees as outlined on the front page of this form.
6. All drawings shall be stamped with the Professional Designer's Seal and shall be signed and dated.
7. Mechanical, Electrical, and Architectural drawings shall be included as part of the application, or indicate that they will follow.
8. Application forms not fully completed, or not accompanied by legible plans, will be returned.
9. The applicable National Building Code, National Fire Code, and/or the Life Safety Code references shall be identified in each section of this form.
10. A letter of Plans Approval, stating the conditions of approval and any recommendations made, will be issued after a complete review of the plans and this form. This letter and the approved stamped drawings by the Government Service Centre, on behalf of Newfoundland and Labrador Fire and Emergency Services, will be forwarded to the applicant and copied to the Municipal Council. Where no Municipal Council exists documentation will be forwarded to the applicant.
11. Approved drawings including materials and equipment specified on this form can not be altered or substituted without prior written approval of the local Government Service Centre.