



ACCESSORY BUILDING DETACHED GARAGE

CONTENTS:
1. Development Permit Application;
2. Building Permit Application;
3. Accessory Building (Detached Garage) Checklist;
4. Drawing: indicate height of garage, size of garage, location of window(s), man-door location, rear and side yard setback measurements (see site plan enclosed or use a copy of a Real Property Report);
5. Inspection Information Sheet

A locate slip from Town of Sundre – Gas Department is required. Accessory Building (detached garages) must not be located over a gas line. Please call Alberta First Call 1 (888) 242-3447 to schedule the locating of the gas line.

Town of Sundre
Planning & Economic Development
Email: townmail@sundre.com
Phone: (403) 638-3551
PO Box 420
717 Main Avenue W.
Sundre, AB T0M 1X0



Building Inspection Information: Accessory Building (detached garage)

Please contact Superior Safety Codes, Calgary: 1 (403) 717 2344 or toll free 1 (888) 717-2344 to schedule a final inspection or, request an inspection at: www.superiorsafetycodes.com

Final Inspection (call when the following are complete)

- Slab on grade is complete;
- Shingles, exterior finish (siding or stucco, fascia and soffits);
- Doors and windows are installed and completed.

Please note, separate permits and inspections are required for electrical and gas services to a detached garage.

A Building Permit is valid for one year from the date of issuance. If your project is not completed within one year, an extension must be requested in writing.

Questions: please contact Planning & Development (403) 638-3551

or

Email: townmail@sundre.com



Development Permit Application Form

This form must be completed in full and submitted for all development permit application types along with the completed applicable checklist. Any applications missing information may be refused.

OFFICE USE ONLY Fee Paid \$ _____ DP# _____ Roll # _____
OSL Paid

Applicant Information

Applicant Name: _____
Mailing Address: _____ City _____ Prov. _____ Postal Code _____
Email Address: _____
Phone: _____ Cell: _____ Fax: _____

Proposed Development

Address of Proposed Development: _____
Legal Description: Lot _____ Block _____ Plan _____
Description of Use:
Residential Commercial Industrial Institutional

Registered Owner

Registered Owner of Land: _____
Mailing Address: _____ City _____ Prov. _____ Postal Code _____
Email Address: _____
Phone: _____ Cell: _____ Fax: _____

Please indicate your preference to receive correspondence on this application by choosing one of the following. If none chosen, or if information provided is unclear, Canada Post will be the default choice.

Mail (Canada Post) Email Fax

Applicant's Signature: _____ Date: _____



Town of Sundre

717 Main Avenue W. PO Box 420
 Sundre, AB T0M 1X0
 e-mail: townmail@sundre.com
 Phone: 403-638-3551

Fax: 403-638-2100

Permit Label

BUILDING PERMIT APPLICATION

To be completed by Town Staff	Development Fee (if applicable)		
Development Permit #	Building Permit Fee		
Building Permit #	Safety Codes Council Fee		
Date:	Total Amount Payable		
Complete Application <input type="checkbox"/>			

To be completed by Owner or applicant		
Estimated Start Date of Construction: _____ Estimated Completion Date of Construction _____		
Project Civic Address: _____		
Legal Address: Lot	Block	Plan
Construction Value \$		Area (ft ² or m ²): Upper _____, Main _____, Basement _____, Garage _____
TYPE OF PROJECT (check applicable box)		
<input type="checkbox"/> Residential New Single Family Dwelling	<input type="checkbox"/> Addition/Attached Garage	<input type="checkbox"/> Park Model
<input type="checkbox"/> Residential Semi-Detached / Duplex Dwelling(s)	<input type="checkbox"/> Basement Development	<input type="checkbox"/> Deck
<input type="checkbox"/> Residential Manufactured / Modular Home	<input type="checkbox"/> Shed	<input type="checkbox"/> Detached Garage
<input type="checkbox"/> Residential Multi-family _____ # of dwelling units	<input type="checkbox"/> Hot Tub/Swimming Pool	<input type="checkbox"/> Wood Burning Appliance
<input type="checkbox"/> Commercial A. <input type="checkbox"/> New building <input type="checkbox"/> Renovation B. <input type="checkbox"/> Office/Personal Service <input type="checkbox"/> Retail <input type="checkbox"/> Assembly (restaurant/lounge)		
<input type="checkbox"/> Industrial A. <input type="checkbox"/> New Building <input type="checkbox"/> Renovation B. <input type="checkbox"/> F3 Light Hazard <input type="checkbox"/> F2 Medium Hazard		
<input type="checkbox"/> Other (if not listed above): describe project _____		

Description of Work: _____

OWNER NAME:		
Address:		Phone:
City:		Cell:
Prov:	Postal Code:	Fax:
E-mail address: _____		

CONTRACTOR / BUILDER NAME:		
Address:		Phone:
City:	Prov.	P.Code
Home Warranty Certificate <input type="checkbox"/> Builders License#: _____		Fax:
E-mail address: _____		

APPLICANT NAME:		
Address:		Phone:
City:		Cell:
Prov:	Postal Code:	Fax:
E-mail address: _____		

List of Contractors Responsible for the Following Disciplines (if applicable)		
HVAC	Name:	Ph #
Electrical	Name:	Ph #
Plumbing	Name:	Ph #
Gas	Name:	Ph #

I authorize the appropriate officers of the Town of Sundre the right to access the property for the purpose of any necessary inspection in conjunction with this application. The undersigned hereby agrees to build according to the approved permits, information above, Plan Examination Report, and plans and specifications herewith submitted and agrees to comply with all Town Bylaws and Safety Code requirements.

I (print name),		hereby certify that:
	I am the owner.	
	I have been designated as the representative or agent of the owner, and I am aware that it is my responsibility to obtain all approvals from the land owner.	
I have read and understand this application in its completed form.		
SIGNATURE:		DATE:

<p>DECISION</p> <p>This Permit is valid for one year from the date of issuance. If this project is not complete within the one-year time limit, an extension must be applied for or the Permit will be deemed to be expired and a new Permit will be required.</p> <p>Date of Issuance of Permit: _____</p> <p>Safety Codes Officer: _____</p> <p>Designation Number: _____</p> <p>Permit Conditions:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>The Town of Sundre is the Authority Having Jurisdiction and the Issuing Municipality</p>

Protection of Privacy - The personal information requested on this form is collected under the authority of the Safety Codes Act, the Municipal Government Act and Section 33 (c) of the Alberta Freedom of Information and Protection of Privacy Act. It will be used for the purpose of issuing permits, Safety Codes compliance verification and monitoring and property assessment purposes. The name of the permit holder and the nature of the permit is public information and will be released to the public upon request. Direct any questions about this collection to the Town of Sundre FOIP Coordinator at 403-638-3551, weekdays.



DETACHED GARAGE INFORMATION SHEET

ADDRESS:	
DRAWINGS TO BE PROVIDED	
Plan view drawing showing dimensions of garage and distances to any property lines within 5 metres?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Plan view shows approximate size and locations of other buildings on the property?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Plan view shows the adjacent street and/or alley	Yes <input type="checkbox"/> No <input type="checkbox"/>
FOUNDATION	
Garage size equal to or less than 55 m ² (592 ft ²) (engineering not required)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Engineered stamped drawing included for garage size greater than 55 m ² (592 ft ²)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Engineer to provide verification letter confirming foundation construction to design when foundation complete?	Yes <input type="checkbox"/> No <input type="checkbox"/>
CONSTRUCTION ABOVE GRADE	
Garage material package provided by (name of company):	
Wall Construction	
2 x 4 studs, double top plates and bottom plates?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2 x 6 studs, double top plates and bottom plates?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Bottom wall plate pressure treated if top of slab less than 150 mm (6 inches) to grade?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Windows and doors eliminated from walls less than 1.2 metres (4 feet) to property line?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exterior cladding to be vinyl siding?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Other exterior cladding, specify type and appearance:	
Man door is 760 mm (30 inches) or greater in width?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5/8" Type X Drywall installed on the inside face of any wall less than 600 mm (24 inches) to property line?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Roof Construction	
Engineered trusses provided by building materials supplier?	Yes <input type="checkbox"/> No <input type="checkbox"/>
H-clips to be installed at sheathing joints if less than 12.5 mm thick and 2 x 4 blocking at roof peak between rafters?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Asphalt singles?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Roofing material other than asphalt shingles, please specify	Yes <input type="checkbox"/> No <input type="checkbox"/>
Soffit blocked off or using non-perforated soffit where any portion of the soffit is less than 1.2 metres (4 feet) to property line?	Yes <input type="checkbox"/> No <input type="checkbox"/>

CONTRACTOR (if other than the owner of property)
NAME:
COMPANY:
ADDRESS:
CITY, PROVINCE, PC
PHONE:
EMAIL:
OTHER INFORMATION
Locate slip identifying the location of underground natural gas lines? Yes <input type="checkbox"/> No <input type="checkbox"/>
<i>The detached garage cannot be located over the natural gas line. Please discuss your options with the Development Officer</i>

Other Information: *(Land Use Bylaw 705, as amended)*

- No accessory building or any portion thereof shall be erected or placed within the front yard of a parcel, except for attached garages;
- An accessory building on an interior parcel shall be situated so that the exterior wall is at least 1.0 m. from the side and rear boundaries of the parcel;
- An accessory building on a corner parcel shall not be situated closer to the street than the main building. It shall not be closer than 1.0 m. to the other side parcel boundary or the rear parcel boundary;
- An accessory building shall not be more than 4.5 m. in height, and shall not exceed the height of the main building;
- Distance requirement between main building and accessory residential building is as follows:
 - 1.22 m. between exterior wall of the house and exterior wall of the accessory residential building or, 0.61 m. between eaves of the house and accessory residential building subject to condition that the accessory building has a one hour fire rated wall;
- No accessory building may be used for the purpose of sheltering livestock or poultry;
- When a parcel abuts a lane less than 6 m. in width, the Development Authority may require a rear yard setback for accessory buildings greater than the prescribed minimum;
- For the purpose of calculating yard setbacks as provided in this Land Use Bylaw, an accessory building, if connected to the main building by a structural element including but not limited to a common foundation, roof or wall, shall be deemed to be part of the main building;
- No part of an accessory building shall be located on or over an easement or utility right-of-way unless authorized by the Development Authority;
- Temporary/soft Sided Buildings shall comply with the following:
 - All guidelines set out in above in Accessory Building – Residential;



SITE PLAN
ACCESSORY BUILDING (DETACHED GARAGE)
OR

PLOT LOCATION OF ACCESSORY BUILDING ON A COPY OF A REAL PROPERTY REPORT

(indicate the size of detached garage, location of man door, windows, distance from primary building, deck, side and rear yard setback measurements)

