
BUILDING DIVISION

This guide has been prepared to provide convenient information only. It is neither a bylaw nor legal document. Should there be any discrepancy between this guide and the relevant City bylaws and/or applicable codes, the text of the bylaws and codes shall be the legal authority. Additional information may be required during the processing of your Building Permit.

GUIDE FOR A RESIDENTIAL RENOVATION/ALTERATION APPLICATION

Definition

In this Guide, renovation/alteration means a change made to an existing building or structure that maintains the floor area of the existing building or structure.

Building Permit is *not* required when:

- Reroofing a roof with similar materials
- Replacing a hot water tank
- Replacing an old furnace with a new one
- Replacing carpets, trim, mouldings, and repainting existing walls
- Replacing a sink or tub of the same size and in the exact same location
- Replacing an exterior window or door with a newer window or door of the same size in the same exterior wall opening

Building Permit is required when (not limited to):

- Creating a new room
- Finishing a basement
- Installing larger openings in exterior walls
- Removing/replacing insulation, vapor barrier and drywall on outside walls
- Relocating plumbing fixtures
- Replacing water lines
- Creating dropped ceilings

It is recommended to contact the building department if you have further questions about proposed renovations and/or alteration.

BUILDING PERMIT APPLICATION SUBMISSION

- Building Permit Application Form

- Two sets of plans – 11”x17” recommended only. Plans must be large enough to be readable. Drawings are to be “signed & sealed by a Registered Professional” which include:
 - ✓ Site Plan showing the following:
 - Civic address and full legal description of the property
 - Location and name of the street(s) abutting the site,
 - North point (northern directional arrow)
 - Contours and grade of the property
 - Location and dimensions of any Right of Ways, easements and/or Restrictive Covenants
 - Setbacks to natural boundary of any swamp, pond or watercourse
 - All other structures
 - ✓ Floor Plan showing the following:
 - The existing floor plan(s) showing which structural elements will be removed. Structural Registered Professional may be required
 - New floor plan(s) showing all proposed construction
 - ✓ Elevations showing the following:
 - Exterior view of the building
 - ✓ Cross Sections showing the following:
 - Sections and details indicating the construction – including size, spacing and species of framing material
- Owner’s Undertaking
- Agent Appointment (if applicable)
- Schedule B for Geotechnical and Structural Discipline
- Certificate of Insurance(s) from Registered Professional(s)
- Copy of a title search made within 30 days of the date of the application
- Copies of all legal documents identified on the title search such as right of ways, easements and covenants
- Copy of Corporate Summary is required if:
 - Agent is a company name or under a Corporate Number
 - Property Owner is a company name or under a Corporate Number

FEES

Building Permit fees are based on the value of construction. A \$153.75 non-refundable deposit fee will be collected once your application has received an accepted Submission Review. Once the deposit is paid, your application will then be placed in the queue for the Official Review.



Submission Review Checklist Residential Renovation/Alteration

Please submit all information at once. Each application must include this form and all accompanying documentation to be accepted. This form can also be found at www.mission.ca/renovation-alteration-checklist.

All buildings on a site require a separate building permit.

Property Address: _____ Permit Type: _____

Zone: _____

Applicant to fill out completely prior to submission.

1. ADMINISTRATIVE ITEMS	Yes	N/A	OFFICE USE	
			Accepted	Not Accepted
a. Have you supplied Owner's Undertaking? Owner's Undertaking Form ? ➤ NOTE: All permits require this form; this form states that the owner is aware of the changes performed on the property.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. If you are not the owner but the applicant acting on behalf of the owner, have you provided a completed Agent Appointment Form ? (ie: Contractor, builder, family member not on title) ➤ NOTE: If Agent is a Company Name or under a Corporate Number , you need to provide a BC Online Corporate Summary dated within 30 days? You can also call 604-775-5525 to obtain a copy of the Corporate Summary. See attached example.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Have you provided a Certificate of Title (also known as a Title Search) (itsa.ca) dated within 30 days? ➤ NOTE: If the owner is a Company Name or under a Corporate Number you need to provide a BC Online Corporate Summary dated within 30 days? You can call 604-775-5525 to obtain a copy of the Corporate Summary. See attached example.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Upon reviewing your Certificate of Title (also known as a Title Search) did you notice any registered documents such as covenants, easements, rights of way, Building Scheme or any other court decided document NOT including mortgage, priority agreements or assignment of rent)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

			OFFICE USE	
1. ADMINISTRATIVE ITEMS - Continued	Yes	N/A	Accepted	Not Accepted
<p>➤ If YES, have you provided complete copies (all pages) of the covenants, easements, rights of way, building schemes and any other court decided documents NOT including mortgage, priority agreements or assignment of rent.</p> <p>You can obtain these documents from ltsa.ca or from a notary or lawyer and they do not need to be dated within 30 days.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. PLANNING COMPLIANCE	Yes	N/A	Accepted	Not Accepted
a. Have you filled out and attached the Planning Compliance form? Please complete both pages of the form attached.	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
3. SERVICING COMPLIANCE	Yes	N/A	Accepted	Not Accepted
a. Is the property serviced by municipal water? <input type="checkbox"/> Yes <input type="checkbox"/> No				
➤ If No , have you provided a Private Well Certification ?	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
b. Is the property serviced by municipal sanitary? <input type="checkbox"/> Yes <input type="checkbox"/> No				
➤ If No , have you provided a Record of Sewerage from Fraser Health ?	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
4. BUILDING AND SITE COMPLIANCE	Yes	N/A	Accepted	Not Accepted
a. Have you provided 2 sets of Architectural Drawings per Building Bylaw 3590-2003, Section 7 , clearly showing:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SITE PLAN:				
▪ Civic address and full legal description of the property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▪ Location and name of the street(s) abutting the site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▪ North point (northern directional arrow)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▪ Contours and grade of the property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▪ Location and dimensions of any Right of Ways, easements and/or Restrictive Covenants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▪ Setbacks to natural boundary of any swamp, pond or watercourse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▪ All other structures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. BUILDING AND SITE COMPLIANCE - continued	Yes	N/A	OFFICE USE	
			Accepted	Not Accepted
FLOOR PLANS:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▪ The existing floor plan(s) showing which structural elements will be removed. Structural Registered Professional may be required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▪ New Floor plan(s) showing all proposed construction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ELEVATIONS:				
▪ Exterior view of the building	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CROSS SECTIONS:				
▪ Sections and details indicating the construction – including size, spacing and species of framing material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▪ Cross sectional details showing that the structure conforms to the BC Building Code ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. If your project requires a Structural Engineer, have you provided 2 sets of Sealed Structural Drawings with a Schedule B per the BC Building Code ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your project may require sprinklers. Please refer to the attached Fire Sprinkler Bylaw 5679-2017) to determine if this is applicable to your application. ➤ If applicable , have you provided two sets of Sprinkler Drawing with calculations accompanied by a Schedule B sealed by Fire Suppression Engineer ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I affirm and certify that all the information and answers to questions herein are complete, true and correct to the best of my knowledge and belief. I understand that any misrepresentation, falsification, or omission of any facts called for in the application may render this application void and will be cause the application to be returned, when discovered.

Name of Applicant (please print)

Signature

Date

PLEASE NOTE: If an application is deemed to be incomplete, an applicant may lose their place in line. A resubmission may be treated as a NEW application. Please take all necessary precautions to supply all the information requested in a single submission. The District will NOT accept information in a piecemeal fashion.

OFFICE USE ONLY

Application Accepted for Official Review

Return to Applicant

Signature of Plan Reviewer

Date

Additional Comments:

OFFICE USE
ONLY
COMMENTS:

OFFICE USE
ONLY
COMMENTS:

OFFICE USE
ONLY
COMMENTS:

SECOND SUBMISSION REVIEW

OFFICE USE ONLY

Application Accepted for Official Review Return to Applicant

Signature of Plan Reviewer: _____

Date: _____

Additional Comments:

OFFICE USE
ONLY
COMMENTS:

OFFICE USE
ONLY
COMMENTS:

PLEASE NOTE: If after this second submission review your application is still deemed incomplete then your next submission will be treated as a NEW application.



PERMIT #: _____

ROLL #: _____

DATE RECEIVED: _____

DATE APPROVED: _____

BUILDING PERMIT APPLICATION

Please Print

INSPECTION SERVICES DEPARTMENT

Site Address: _____

Legal Description: _____

Value of Construction: _____

PERMIT TYPE

- SINGLE FAMILY DWELLING
- MANUFACTURED / MOBILE HOME
- TWO FAMILY DWELLING
- MULTI-RESIDENTIAL
- COMMERCIAL
- INDUSTRIAL
- INSTITUTIONAL

DESCRIPTION

- NEW CONSTRUCTION
- ADDITION
- ALTERATION / RENO
- TENANT IMPROVEMENTS
- SECONDARY SUITE
- DEMOLITION
- SPECIAL INSPECTION

- OTHER: _____
- ACCESSORY BUILDING
- SIGN
- GARAGE / CARPORT
- WOODSTOVE
- SPRINKLER
- SERVICES

BRIEF DESCRIPTION OF PROJECT: _____

Business Name: _____ **Business Licence # (if applicable)** _____

APPLICANT

NAME: _____

ADDRESS: _____
HOUSE/STREET CITY PROVINCE POSTAL CODE

PHONE: _____ E-MAIL: _____ FAX: _____

PROPERTY

NAME: _____

OWNER

ADDRESS: _____
HOUSE/STREET CITY PROVINCE POSTAL CODE

PHONE: _____ E-MAIL: _____ FAX: _____

BUILDER

NAME: _____

ADDRESS: _____
HOUSE/STREET CITY PROVINCE POSTAL CODE

PHONE: _____ E-MAIL: _____ FAX: _____

I HEREBY CONFIRM THAT THE INFORMATION SUPPLIED IN SUPPORT OF THIS APPLICATION IS TRUE AND CORRECT: _____

OWNER OR AGENT SIGNATURE

OFFICE USE ONLY COMMENTS:

District of Mission Building Bylaw 3590-2003

OWNER'S UNDERTAKING

Re: **Property Address:** _____

Legal Description: _____

Permit #: _____

This line to be completed by the District of Mission

This undertaking is given by the undersigned, as the *owner* of the property described above, with the intention that it be binding on the *owner* and that the District of Mission will rely on same.

I confirm that I have applied for a *permit* pursuant to Building Bylaw 3590 –2003 and that I have carefully reviewed and fully understand all of the provisions of the Bylaw and in particular understand, acknowledge and accept the provisions describing the purpose of the Bylaw, the conditions under which permits are issued, the disclaimer of warranty or representation and the limited extent of the scope of the Bylaw and inspections there under.

Without in any way limiting the foregoing, I acknowledge fully that it is my responsibility, whether or not any work to be performed pursuant to the *permit* applied for is done by me, my *agent*, a contractor or a *registered professional* to ensure compliance with the *Building Code* and the Bylaw.

I am not in any way relying on the District of Mission or the *Building Official* of the District of Mission, to protect the *owner* or any other persons as set out in the Bylaw and I will not make any claim alleging any such responsibility or liability on the part of the District of Mission or its *Building Official*.

Owner's Information:

Name: _____

Address: _____

Telephone: _____ **Email:** _____

Contact Person: _____

Telephone: _____ **Email:** _____

Date: _____

Signature: _____



D E V E L O P M E N T S E R V I C E S D E P A R T M E N T

AGENT APPOINTMENT

"I (We) the undersigned, being the registered owner(s) of the property located at _____
Property Address

_____ (the 'property') hereby irrevocably appoint
Property Address

_____ of _____
Name Company

_____, _____ as the agent
Telephone Email

for all purposes, including the granting of all undertakings, in respect of:

- an application for land development and any matters that are directly or indirectly related to the development application;
- the granting of any undertakings, in respect of an application for a building permit in accordance with the provisions of Building Bylaw 3590-2003 and any other matters that are contained directly or indirectly within the provisions of the bylaw"; and/or
- the demolition of a building(s) on the property.

Signature (registered owner)

Name (please print)

Signature (registered owner)

Name (please print)

Signature (registered owner)

Name (please print)

Dated _____

This form must be completed by the home designer or architect and submitted with the Pre-Application Submission Review Checklist when applying for a building permit.

Property Address: _____

Zone of Property: _____

1. I have checked the [zone](#) and my plans comply with the allowable:

- | | | |
|---------------------------|------------------------------|-----------------------------|
| a. Use(s) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. Setbacks | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. Building Height | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. Lot Coverage | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you answered **No** to any of the above, you will be required to obtain a Development Variance Permit from Council, and **a Building Permit will not be issued until this is addressed.**

2. I am aware of, have shown, or addressed all:

- | | | |
|--|------------------------------|-----------------------------|
| a. Right-of-Ways | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. Easements | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. Covenants (design, no-build, etc.) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

3. Do you need a **Development Permit** for any of the following?

a. **Riparian Area Protection Regulation?**

Is the building within 30 metres of a watercourse? Yes No

If **YES**, have you provided a completed [Riparian Areas Protection Regulation Assessment Report](#) that has been registered with the Province of BC? Yes No

If you answered **Yes** to the above, you will be required to obtain an Environmental Development Permit.

A Building Permit will not be issued until this is addressed.

b. **Geohazard Report?**

Does this site need a site-specific geotechnical report as listed on title? Yes No

If **YES**, have you provided a site-specific geohazard report? Yes No

([Assistance to Developers and Building Permit Applicants Undertaking Landslide Hazard Assessments](#))

Note: The Building Inspector may ask for a geotechnical report even if there isn't one registered on title, based on site conditions or where the home is placed on the lot.

If you answered **Yes** to the above, you will be required to obtain a Geohazard Development Permit.

A Building Permit will not be issued until this is addressed.

c. **Fire Interface?**

Is this building within the District of Mission's [Fire Interface Development Permit Area: Map 17 Fire Interface DP Area](#) (OCP Bylaw 5670-2017, Appendix C)? Yes No

If **YES**, have you designed your building to comply with the District of Mission's [Fire Interface Guidelines](#)? Yes No

If you answered **Yes** to the above, you will be required to obtain and address any design issues in a Fire Interface Development Permit.

A Building Permit will not be issued until this is addressed.

Name of Owner or Agent (please print)	Signature	Date
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DESIGNER MUST COMPLETE THIS PORTION

Form and Character Development Permit

Does the development address the requirements of the Form and Character Development Permit and with all restrictive covenant(s) listed on title?

If NO, please explain.

NOTE: Depending on the restrictive covenant, there may be instances where the District cannot consider modifications.

Designer's Recommendation: Approve Deny Request Modification

Name of Designer (please print)	Signature	Date
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