

DEVELOPMENT PERMIT DETACHED DWELLING & DUPLEX APPLICATION

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Roll #					DP #	
Property Address			Project Description			
Lot Block			Plan			
Name of Applicant			•	Tel Fax		Cell
Address of Applicant				1		Postal Code
E-mail						
Name of REGISTERED OV	WNER			Tel Fax		Cell
Address Of REGISTERED O	WNER			-		Postal Code
Estimated Value of Project		D-			Completion Date (Estimated)	•
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OFFICE USE (h Н	- Total C	0	•	Descript #
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		 j) Lot grades (include grade points as indicated on pg. 4, Diagram 1) See <u>LOT GRADE NOTE</u> below k) Width & length of all parking areas including parking pads, stalls, driveways, etc.
		No third length of all parking aleas including parking pads, stalls, driveways, etc. No third length of all parking aleas including parking pads, stalls, driveways, etc. No third length of all parking aleas including parking pads, stalls, driveways, etc.
		m) Location of existing and proposed fences
		n) Location of existing and proposed service lines
		7. ELEVATION DRAWINGS - 2 sets (11"x17") OR digital PDF, showing:
		a. Exterior of proposed building, including windows, doors, projections and decks
		b. Lot grades, grades at the corners of the building and the grade lines plotted on each of the
		building elevation drawings and extended to property line (consistent with the Site Plan)
		c. Height from grade to the top of roof on each elevation drawing
Ш		d. Elevations of any proposed retaining wall
		8. FLOOR PLANS - 2 sets (11"x17") OR digital PDF, showing: a. Layout of all exterior and interior walls. Identify rooms by function (eg. kitchen, bathroom, etc.)
		b. Location of all doors and windows
		c. Dimensions of the building(s); including cantilevers, other projections, decks, etc.
LOT G	RADE	<u>NOTE</u>
		odivisions the following information is required (see diagrams pages 4-8):
a)		uilding Grade Certificate, produced by the engineer for the developer of the subdivision,
b)		be submitted with the application; ides shown on the site plan and the
۵,		on drawings. The elevation drawings should also show the elevations of the footings and
0 1-		nitary invert if applicable.
		oped areas (infill) of the community, grades are required at the locations indicated on diagrams.
aı	lacricu	ulagrams.
		nent Authority may require additional material to properly evaluate the proposed
develop	ment.	
In addi	tion to	1 set of plans required for the Development Permit Application, a Building Permit
		quires an additional 2 sets of plans (11'x17'). A digital PDF version is also acceptable.
I hereb	v make	application under the provisions of the Town of Olds Land Use Bylaw #01-23 for a
		Permit in accordance with the plans and supporting information submitted herein and which
form pa	art of this	s application.
Nor	mo of A	DDLICANT (Places Print)
INdi	iie oi A	PPLICANT (Please Print)
Sig	nature (of APPLICANT DATE

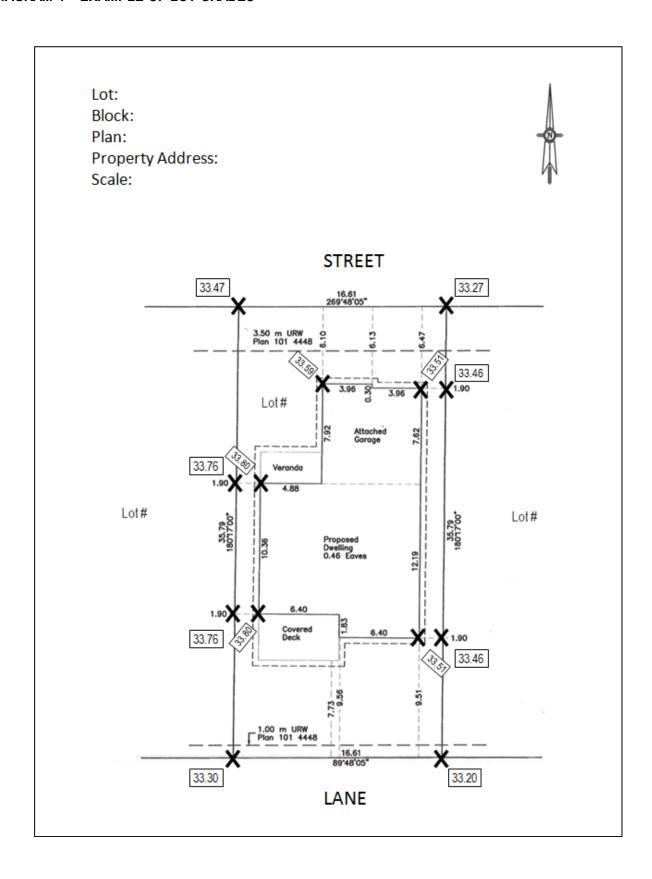


OWNER AUTHORIZATION

PLEASE F	PRINT	DP #
Property Addre	SS:	
∟ot	Block	Plan
	ertify I am the Registered O ed property.	wner or Agent authorized to act on behalf of the registered owner(s) of the
Name of E	☐ Registered Owner/ ☐ A	gent
Signature	of 🗖 Registered Owner / 🗅	□ Agent Date
COMPLET	ED:	D BY A REGISTERED OWNER, THE SECTION BELOW MUST BE to act on our behalfin submission of this Application.
COMPLET I/we authoriz	ED:	
COMPLET I/we authoriz Name of R	ze the above named Agent	to act on our behalfin submission of this Application.

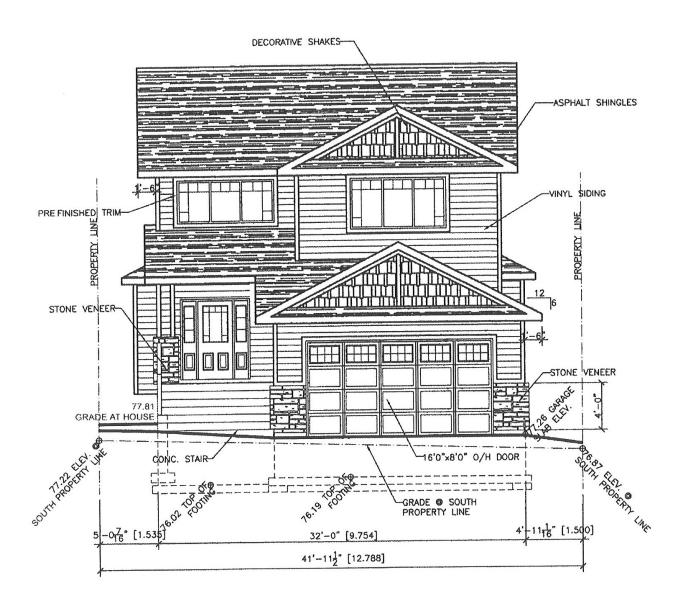
The personal information on this form is collected under the Freedom of Information and Protection of Privacy Act and will be used in order to process this form. Please forward questions or concerns to the FOIP Coordinator at 4512 46 Street, Olds, AB T4H 1R5. Phone 403-556-6981, Fax 403-556-6537, or email FOIP@olds.ca

DIAGRAM 1 - EXAMPLE OF LOT GRADES

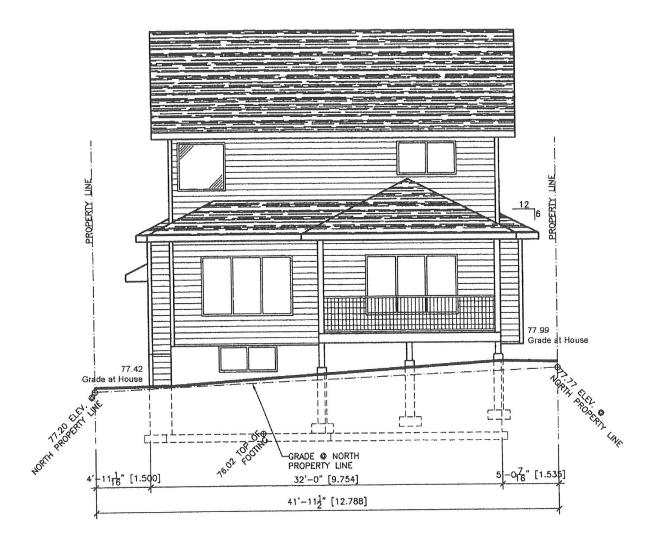


Updated: January 3, 2022 Page 4 of 8

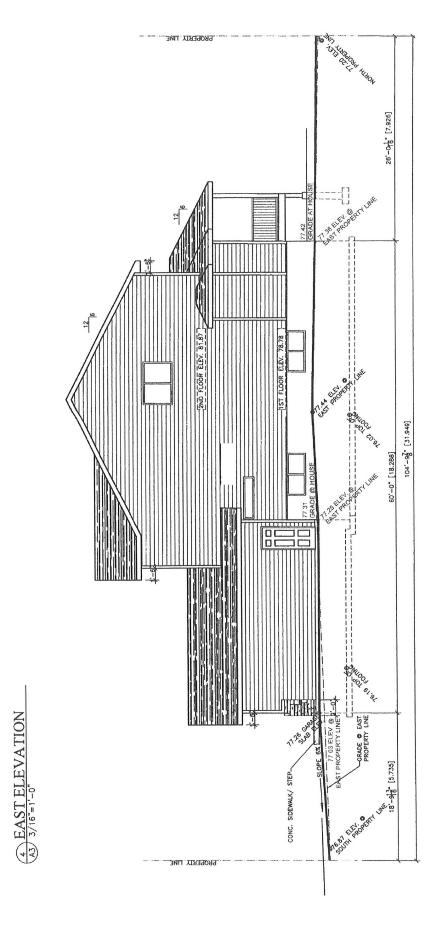
SOUTH ELEVATION A3 3/16"=1'-0"



NORTH ELEVATION 3/16"=1'-0"







Page 8 of 8



BUILDING PERMIT APPLICATION

BP Fee \$	Receipt#
SCC Fee \$	Roll #
TOTAL \$	TOIL II

Building Permit #	Application Date		
Project Location: Civic Address Lot	Block Plan		
Applicant	Daytime Phone		
Mailing AddressEmail			
Owner/ Prospective Owner	Daytime Phone		
Mailing Address Email			
Contractor Contact Person:			
Mailing Address	City/Town Postal Code		
Name of Architect/ Engineer (if applicable)			
Occupancy Type: Residential Commercial Industrial Institutional			
Type of Work: ☐ New Construction ☐ Addition ☐ Renovation ☐ Demoli ☐ Wood Burning Appliance ☐ Other	•		
Building Area Ft ² : Basement Development Ft ²	Number of Stories		
Description of Work:			
Value of Material & Labour \$			
Permit Applicant Declaration: The permit applicant certifies that this installation w	ill be completed in accordance with the Alberta Safety codes Act and		
	CANT ITURE		
The personal information requested on this form is being collected for the purpose of processing y Information and Protection of Privacy Act (FOIP). By providing this information, you consent to its collection or release of this information, please contact the Town of Olds FOIP Coordinator at (40)	our application and is governed, authorized and protected by the Freedom of use for the above purposes. If you have any questions with respect to the		
Permit Validation Section:			
Special Conditions:	AB New Home Warranty (If applicable)		
General Conditions: This Permit expires if the construction to which it applies: - Is not commenced within 90 days from the date of issue of the permit - Is suspended or abandoned for a period of 120 days, or - Is in respect of a seasonal use residence and the construction is susport abandoned for a period of 240 days after the construction is starte	Email: planning@olds.ca pended Phone: 403-507-4806		
Issuing S.C.O. Name S.C.O. Designation # S.C.O. Signa	ture Date of Issue		



Construction Fire Safety Plan Small buildings

Address: Building Permit #

Description of Project:

General Considerations: FIRE/POLICE/AMBULANCE: 9-1-1

- Address to be posted in conspicuous location
- A warning system will be in place at all sites to warn of potential threats, and facilitate evacuation
- Each site will have a muster point where workers can be accounted for
- A method of notifying the fire department, or other emergency agency shall be available at all times
- Fire extinguishers minimum 2A-10 BC will be available at all times at every site while workers are present
- Access to fire hydrants and buildings for fire apparatus must be maintained
- Hazards Control:
- At the end of each day combustibles will be cleared from the site area, disposed of in bins, or stored in neat piles
- No open-flame devices will be used inside buildings unless a dedicated watch for one hour is in place, check after 4 hours this includes hot works(welding, soldering)
- Use of propane to conform to the Propane Handling Code

Building Owner/Contractor Signature:_____

- Propane tanks or flammable liquids containers are not allowed within buildings.
- Smoking is not permitted where conditions are hazardous or potential of ignition exists
- Construction Heaters shall be connected so as to minimize danger of mechanical damage and
 upset and be installed on a solid level base. Temporary heaters must be placed at least 5 m from
 combustible tarpaulins or similar coverings. Tarps must be securely fastened to prevent wind
 from blowing where they could upset the heater or be set on fire. Piping, tubing, hose and
 fittings shall be supported, secured and protected from damage and strain. Propane regulators
 shall be properly fastened within the protective cover.

Contact Personnel:

Contact (24 hr.)

Provide a list of names and telephone numbers of person(s) to be contacted during non-operating hours or in emergency situations.

	
,	with Section 2.8.2 of the Alberta Fire Code, and on signature, building owner/contractor and the Town of Olds Fire Department

Date:



UTILITY EXCAVATION PERMIT APPLICATION

Please e-mail completed form to planning@olds.ca

Please check a box below that best describes your utility e	xcavation:	
□ Deep Utility		
□ Shallow Utility	Permit #	
Name of APPLICANT	Tel/ Cell	Fax
Address of APPLICANT		Postal Code
Name of OWNER (if different from Applicant)	Tel/ Cell	Fax
Name of CONTRACTOR	Contact Name for site (24 hours)	Contact Tel (24 hours)
Location of Excavation	Start Date	End Date
Estimated date for Re-Paving (within 30 days)		
This checklist is to be completed and all information	submitted along with your utility exca	avation permit application.
☐ Locates must be obtained PRIOR to excavation		
☐ Alberta One Call — <u>www.alberta1call.com</u> or 1-8	00-242-3447	
□ DigShaw – <u>www.digshaw.ca</u> or 1-866-344-7429		
☐ Site Plan — Property lines, buildings or structure	s, street/alley, or any other relevant in	formation.
☐ Alberta Transportation — Call 1-403-340-5166 If applicable)	working within a 2-block radius of Hig	hway 27 or Highway 2A (if
☐ Canadian Pacific Railway – Call 1-888-333-6370	(if applicable)	
□ Road Closure (InterCon) − 1-866-926-9150		
☐ Road Plan (if applicable)		

General Conditions – PLEASE READ

There is no fee for the Shallow Utility Excavation Permit application. A Development Security equal to the cost of the portion of construction that is on municipal lands is required and will be charged per Rates Bylaw. The fee for a new connection to a municipal underground service trunk main (water, sanitary or storm) is \$1,200 per service connection (non-refundable). For example, if installing water and sewer services, the amount owing will be \$2,400.

A Development Security equal to the cost of the portion of construction that is on municipal lands is required and will be charged per Rates Bylaw. The value of the Development Security required for a set of two service connections, based on current fair market values, \$1500 for work within boulevards only including service drop installation; \$4,000 for gravel surface with or without sidewalk/curb and gutter, and \$15,000 for paved surface with sidewalk/curb and gutter, per trench. If costs are greater, the Applicant will be billed for the actual amounts. It is the Developer/Contractor's responsibility to return the surface excavated to its equivalent or better. The Development Security will be held for a period of 2 (two) year from completion of construction, after which time Final Acceptance Certification will be given, so as to allow time for settlements/issues to become apparent. After this time, as long as there have been no performance issues, the Development Security will be returned.

There is no fee or securities required to connect to existing water, sewer, or storm services if the service lines are already to the property line. The Town of Olds requires and inspection of the connections **PRIOR TO BACKFILLING** to ensure quality assurance of connection to Town infrastructure.

The Applicant shall contact the **Town of Olds Planning and Infrastructure Department** at **403-507-4806** to arrange for an inspection of the water and sewer connections <u>PRIOR TO BACKFILLING</u>. Please be advised that the Development Security will <u>not</u> be returned to the Developer if water and sewer connections are not inspected prior to backfilling. Please note that <u>48 hours' notice</u> must be given to the <u>Planning and Infrastructure Department</u> prior to the desired inspection date. Inspections will be conducted between 8:30 am – 4:30 pm Monday to Friday only.

If OLD SERVICES are to be abandoned, they must be properly abandoned and inspected by a qualified member of the Town of Olds Utilities team. Please note that <u>48 hours' notice</u> must be given to the Planning and Infrastructure Department prior to the desired inspection date. Call 403-507-4806 to arrange for an inspection. Inspections will be conducted between 8:30am – 4:30pm Monday to Friday only. Water Services ½" or smaller are to be properly abandoned and replaced with new service connection pipe installed to the main.

The Applicant shall contact the **Town of Olds Planning and Infrastructure Department** at <u>403-507-4806</u> to arrange for a **SIDEWALK** inspection. Please note that <u>48 hours' notice</u> must be given to the **Planning and Infrastructure Department** prior to the inspection date desired. Inspections will be conducted between 8:30 am – 4:30 pm Monday to Friday only.

All excavations within paved roads will be backfilled, compacted, and have a 3" concrete top (flush with pavement surface if asphalt top cannot be applied immediately) and placed in the presence and observation of Town of Olds Planning and Infrastructure Department staff. 48 hours' notice is required to have the inspector present. An inspection is required for any deposit to be returned. Inspections will be conducted between 8:30am – 4:30pm Monday to Friday only.

If the work is completed <u>WITHOUT AN INSPECTION FROM THE TOWN OF OLDS</u> the Contractor will be billed for the inspection at cost plus 50% for any work carried out by the Town of Olds or its agent to make any road, alley, or sidewalk safe, or to permanently complete excavations.

The <u>APPLICANT</u> will ensure that the work site is maintained in such a way that no harm may come to pedestrians or vehicles that may have to pass through or around the site, including barricades and lights if required. The Applicant agrees that the Town shall be <u>SAVE HARMLESS</u> from any injury/damages/losses that may occur due to neglect on the applicant's part. Traffic will not be delayed or detoured without authorization from the Town of Olds, Operational Services Department.

The applicant shall provide proof of insurance identifying the Town of Olds as an additional named insured for
those portions of construction on Town ownedlands.

plicant will be responsible for any wor	lule from start to completion of the project for approval by the Town of Ork stoppages or deficiencies.
rning this application, the Applicant as	grees to conform to the above General Conditions while working within Old
	, see to sometime the the above senteral sentantions while working warm ora
Print NAME of APPLICANT	
Construct of ADDITIONAL T	D.4.
Signature of APPLICANT	Date
PERMIT APPROVAL – OFFICE USE ONLY	
le reviewed by:	Fees Paid \$
	(Codes: Serv ice Connection - Water 1-4100-411-00;
	Wastewater 1-4200-411-00: Security 4-0000-474-
perational Services	Wastewater 1-4200-411-00; Security 4-0000-474- 01) Receipt #
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1unicipal Address	of PROPERTY						
Legal Description Lot Block Plan							
ame of OWNER						Tel	
Name of CONTRACTOR / INSTALLER Tel							
Vater / Sew er Line	Connection App	roved? Corrections F	Required:				
Comments							_
lanning and I	nfrastructure	CCC Inspection	Report (to b	- e complete	ed by Tow	n of Olds)	
he Town of C	olds Planning a	CCC Inspection nd Infrastructur d between 8:30	e department	requires 4	8 hours' n	otice for insp	ections.
The Town of C nspections wi	olds Planning a Il be conducte	nd Infrastructur	e department am and 4:30	requires 4 pm Monda	·8 hours' r y to Frida	otice for insp y only.	
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Signature of Contractor / Installer

Signature of Operations Inspector

Date

Planning and Infrastructure FAC Inspection Report (to be completed by Town of Olds)

The Town of Olds Planning and Infrastructure department requires 48 hours' notice for inspections. Inspections will be conducted between 8:30 am and 4:30 pm Monday to Friday only.

The FAC inspection is the final inspection at the end of the two-year warranty period. If any settlement or issues have arisen due to the work, the contractor/developer must rectify issues before release of deposit. There is a two-year compaction / settlement guarantee for all roads & sidewalks. If these settle within two years, the Contractor / Installer will make necessary corrections at no cost to the Town of Olds. This section is not applicable to existing services that are being connected to the property line.

Name of CONTRAC	TOR / INSTALLER			Tel
Pavement	? Approved	Propertions Required:		
Sidewalks / Curbs	?Approved	Corrections Required:		
Comments				
			_	
Signature of Opera Installer	ations Inspector		Signature of Contracto	or/
Date			_	

The personal information on this form is collected under the Freedom of Information and Protection of Privacy Act and will be used in order to process this form. Please forward questions or concerns to the FOIP Coordinator at 4512 46 Street, Olds, AB T4H 1R5. Phone 403-556-6981, Fax 403-556-6537, or email FOIP@olds.ca

Terms and Conditions:

- If the contractor fails to remedy any site damages, settlements, or any other construction related damages incurred during the shallow utility construction and up to the issuance of FAC, the deposit will be kept and utilized by the Town to complete all construction restoration. The following two statements apply for restoration costs valued higher and lower than the deposit being held in this event:
 - A. If the costs of restoration is greater than the deposit held and utilized by the Town of Olds, the Town will keep records of time and materials utilized for these corrective actions. If/when the contractor applies for a utility excavation permit with the Town of Olds, the permit will not be approved until such time as the Town of Olds is reimbursed for the previous damages and expenses outstanding.

 B. If the costs of the remedy are less than the amount owing, the Town at its own discretion may return a portion of the unused deposit.
- Exposing of deep utilities such as CB lines and storm mains: Contractors can either expose the lines to ensure 0.5m minimum separation OR provide camera inspection of the Town infrastructure at time of CCC to prove that Town infrastructure was not damaged by utility installation.