

Building Division

Change of Use Permit

Application Guide



Description

A building permit for a *Change of Use* of an existing building, or portion of an existing buildings current use. For example, changing a residential home into a daycare facility.

General Information

A building permit issued by the Municipality is required for the change of use to the Major Occupancy of any building or structure as defined in Part 2 and Part 10 of the Ontario Building Code. These requirements are in place to ensure the health and safety of the public and all occupants of the building. Some examples of what could be affected in a change of use may be the occupant load, structural loading and design, fire & life safety elements as well as health requirements for washrooms. Where a change of use permit requires no compensating construction, a full building audit will be required demonstrating such compliance by a qualified individual.

Required Drawings

Survey or Site Plan

Survey or site plan, referenced to a current survey, showing the size and location of all existing structures with distances to property lines as well as structures on adjacent properties.

Floor Plans & Elevations - Architectural & Structural

Floor plans fully dimensioned for each level showing architectural and structural details including foundation; slab, footings, exterior walls, joists, rafters, lintels and beams. Plans to show the use of all spaces including the location of all washrooms, type of plumbing fixtures and floor drains. Drawings of all four exterior elevations with floor to ceiling heights and overall building height.

Sections & Details

Cross section(s) to show building construction specifications of all floor, wall and roof assemblies. Identify required fire resistant ratings for such wall, floor, ceiling and roof assemblies where applicable. Identify current and proposed load bearing capacity for existing and proposed use of all floors.

Provide a detailed summary of the current and proposed use, occupant load and the nature of the business and number of employees. Dimension and note entrances and exits from the building or space within the building show emergency lighting, landings, stairs and ramps where applicable.

Note: Drawings prepared by a qualified Designer as defined by the Ontario Building Code, must include designer's name, Building Code Identification Number (BCIN), signature, and statement that the designer has reviewed and takes responsibility for the design and meets the qualifications set out in the Ontario Building Code as a Designer or other/independent Designer.

Required Forms

- **Application for a Permit to Construct or Demolish**
- **Schedule 1 Designer Information * if required**
- **Plumbing Data Sheet (required where plumbing fixtures are being added or altered)**
- **Owner's Authorization Form**
- **Zoning Declaration Form**
- **OBC Data Matrix Form**

Exemptions - Schedule 1

If drawings are prepared, stamped and signed by a qualified Engineer or Architect, they are exempt from submitting a Schedule 1.

Required Fees

Building permit application fees can be found on the Townships website here: [Fees and Charges By-Law](#)

Permit Fee	As Per Fees and Charges By-Law
Road Damage Deposit - all Municipal roadways *if applicable	\$1,000 - \$5,000

Apply Online

All applications for building permits are to be submitted online. To submit an application for building permit applicants will be asked to provide the above forms, fees and digital copies of the specified drawings. For further information regarding online submission application requirements please visit our Website page [Electronic Building Permit Application](#).

Additional Requirements/Approvals/ Applicable Law

The Building Code Act prohibits the issuance of a Building permit if the proposed change of use, construction or demolition will contravene applicable law as defined in the Ontario Building Code. Change of Use Permits will require approval from the Townships Planning Department to ensure Zoning and the Townships Official Plan comply with the proposed new use of a building or structure.

Please verify all approvals that may be necessary to submit a complete application. The following are examples:

- **Zoning By-Law Amendment/ Official Plan Amendment** (Township Planning Department)
- **Site Plan Development Approval/Agreement** (Township Planning Department)
- **Committee of Adjustments – Minor Variance Approval** (Township Planning Department)
- **Approval or Permit from Lake Simcoe Region Conservation Authority or Toronto Region Conservation Authority**

Should you have any questions or require clarification please contact the Building Division, King Township, 2585 King Road, King City, L7B 1A1 (905) 833-5321

Application for a Permit to Construct or Demolish

This form is authorized under subsection 8(1.1) of the *Building Code Act, 1992*

For use by Principal Authority				
Application number:		Permit number (if different):		
Date received:		Roll number:		
Application submitted to: _____ (Name of municipality, upper-tier municipality, board of health or conservation authority)				
A. Project information				
Building number, street name			Unit number	Lot/con.
Municipality	Postal code	Plan number/other description		
Project value est. \$		Area of work (m ²)		
B. Purpose of application				
New construction	Addition to an existing building	Alteration/repair	Demolition	Conditional Permit
Proposed use of building		Current use of building		
Description of proposed work				
C. Applicant				
		Applicant is: Owner or Authorized agent of owner		
Last name		First name	Corporation or partnership	
Street address			Unit number	Lot/con.
Municipality	Postal code	Province	E-mail	
Telephone number		Fax	Cell number	
D. Owner (if different from applicant)				
Last name		First name	Corporation or partnership	
Street address			Unit number	Lot/con.
Municipality	Postal code	Province	E-mail	
Telephone number		Fax	Cell number	

E. Builder (optional)				
Last name		First name	Corporation or partnership (if applicable)	
Street address			Unit number	Lot/con.
Municipality		Postal code	Province	E-mail
Telephone number		Fax		Cell number
F. Tarion Warranty Corporation (Ontario New Home Warranty Program)				
i. Is proposed construction for a new home as defined in the <i>Ontario New Home Warranties Plan Act</i> ? If no, go to section G.			Yes	No
ii. Is registration required under the <i>Ontario New Home Warranties Plan Act</i> ?			Yes	No
iii. If yes to (ii) provide registration number(s): _____				
G. Required Schedules				
i) Attach Schedule 1 for each individual who reviews and takes responsibility for design activities.				
ii) Attach Schedule 2 where application is to construct on-site, install or repair a sewage system.				
H. Completeness and compliance with applicable law				
i) This application meets all the requirements of clauses 1.3.1.3 (5) (a) to (d) of Division C of the Building Code (the application is made in the correct form and by the owner or authorized agent, all applicable fields have been completed on the application and required schedules, and all required schedules are submitted). Payment has been made of all fees that are required, under the applicable by-law, resolution or regulation made under clause 7(1)(c) of the <i>Building Code Act, 1992</i> , to be paid when the application is made.			Yes	No
ii) This application is accompanied by the plans and specifications prescribed by the applicable by-law, resolution or regulation made under clause 7(1)(b) of the <i>Building Code Act, 1992</i> .			Yes	No
iii) This application is accompanied by the information and documents prescribed by the applicable by-law, resolution or regulation made under clause 7(1)(b) of the <i>Building Code Act, 1992</i> which enable the chief building official to determine whether the proposed building, construction or demolition will contravene any applicable law.			Yes	No
iv) The proposed building, construction or demolition will not contravene any applicable law.			Yes	No
I. Declaration of applicant				
I _____ declare that: (print name)				
1. The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.				
2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.				
_____		_____		
Date		Signature of applicant		

Personal information contained in this form and schedules is collected under the authority of subsection 8(1.1) of the *Building Code Act, 1992*, and will be used in the administration and enforcement of the *Building Code Act, 1992*. Questions about the collection of personal information may be addressed to: a) the Chief Building Official of the municipality or upper-tier municipality to which this application is being made, or, b) the inspector having the powers and duties of a chief building official in relation to sewage systems or plumbing for an upper-tier municipality, board of health or conservation authority to whom this application is made, or, c) Director, Building and Development Branch, Ministry of Municipal Affairs and Housing 777 Bay St., 2nd Floor. Toronto, M5G 2E5 (416) 585-6666.

Schedule 1: Designer Information

Use one form for each individual who reviews and takes responsibility for design activities with respect to the project.

A. Project Information			
Building number, street name	Unit no.	Lot/con.	
Municipality	Postal code	Plan number/ other description	
B. Individual who reviews and takes responsibility for design activities			
Name	Firm		
Street address	Unit no.	Lot/con.	
Municipality	Postal code	Province	E-mail
Telephone number	Fax number		Cell number
C. Design activities undertaken by individual identified in Section B. [Building Code Table 3.5.2.1. of Division C]			
House	HVAC – House	Building Structural	
Small Buildings	Building Services	Plumbing – House	
Large Buildings	Detection, Lighting and Power	Plumbing – All Buildings	
Complex Buildings	Fire Protection	On-site Sewage Systems	
Description of designer's work			
D. Declaration of Designer			
<p>I _____ declare that (choose one as appropriate):</p> <p style="text-align: center;">(print name)</p> <p>I review and take responsibility for the design work on behalf of a firm registered under subsection 3.2.4. of Division C, of the Building Code. I am qualified, and the firm is registered, in the appropriate classes/categories.</p> <p>Individual BCIN: _____</p> <p>Firm BCIN: _____</p> <p>I review and take responsibility for the design and am qualified in the appropriate category as an "other designer" under subsection 3.2.5. of Division C, of the Building Code.</p> <p>Individual BCIN: _____</p> <p>Basis for exemption from registration: _____</p> <p>The design work is exempt from the registration and qualification requirements of the Building Code.</p> <p>Basis for exemption from registration and qualification: _____</p> <p>I certify that:</p> <ol style="list-style-type: none"> 1. The information contained in this schedule is true to the best of my knowledge. 2. I have submitted this application with the knowledge and consent of the firm. <p style="text-align: center;">_____</p> <p style="display: flex; justify-content: space-between;"> Date Signature of Designer </p>			

NOTE:

1. For the purposes of this form, "individual" means the "person" referred to in Clause 3.2.4.7(1) (c) of Division C, Article 3.2.5.1. of Division C, and all other persons who are exempt from qualification under Subsections 3.2.4. and 3.2.5. of Division C.
2. Schedule 1 is not required to be completed by a holder of a license, temporary license, or a certificate of practice, issued by the Ontario Association of Architects. Schedule 1 is also not required to be completed by a holder of a license to practise, a limited license to practise, or a certificate of authorization, issued by the Association of Professional Engineers of Ontario.

Building Division Plumbing Data Form



Project Information

PROJECT DESCRIPTION:

PROPERTY ADDRESS:

Street No. and Name City Postal Code

OWNER NAME:

First Last

TELEPHONE NUMBER:

EMAIL:

Fixture Information

Fixture or Device	Fixture Flow	Bsmt	1st Floor	2nd Floor	3rd Floor	Subtotal	Total
Bathrooms							
¹ Bathroom group with 2 fixtures (sink & toilet)	2.9						
¹ Bathroom group with 3 fixtures (1 sink, 1 toilet & 1 bathtub with or without shower, <u>or</u> 1 shower head)	3.6						
¹ Bathroom group with 4 fixtures (2 sinks, 1 toilet & 1 bathtub with or without shower head, <u>or</u> 1 shower head)	3.7						
¹ Bathroom group with 4 fixtures (1 sink, 1 toilet, 1 bathtub, & 1 shower)	5.0						
¹ Bathroom group with 5 fixtures (2 sinks, 1 toilet, 1 bathtub, & 1 shower head)	5.7						
¹ Bathroom group with 6 fixtures (2 sinks, 1 toilet, 1 bidet, 1 bathtub, & 1 shower head)	7.7						
Additional Shower	1.4						
² Each additional Shower head or body spray, 9.5 L/min or less per head	1.4						
Bidet	2.0						
Urinal, with flush tank	3.0						
Urinal, with self-closing metering valve	2.0						
Laundry							
Clothes washer, 3.5kg	1.4						
Sink, laundry (1 or 2 compartments)	1.4						
Kitchen							
Sink, kitchen, domestic, 8.3 L/min or less	1.4						
Sink, bar	1.0						
Dishwasher, domestic	1.4						
Other							
³ Hose bibb (1/2 inch supply)	2.5						
Additional Hose bibb (1/2 inch supply)	2.5						
Hose bibb (3/4 inch supply)	3.0						
Hose bibb, combination hot and cold	2.5						
Total Fixture Units =							

¹ Bathroom groups are based on a shower/tub with 1/2" supply. Additional fixture flow will apply for 3/4" supply spouts. (O.B.C. Table 7.6.3.2.A (3))

² Base fixture groups assume a single shower head. Additional body sprays or showerheads must be added to the calculation.

³ Assumption is that all dwellings will have two 1/2" hose bibs (one at rear and one in garage) which are automatically included in the above calculations

Note: Maximum number of fixture units on a 3/4" Water Service Pipe = 26 (OBC 7.6.3.4).

I hereby certify that the information supplied above is accurate to the best of my knowledge.

Name (please print)

Signature

Personal information collected on this form is under the authority of the Municipal Act, s. 11. The purpose of this collection is to administer the Service Connection Permit Application Process. Personal information provided on this form is protected in accordance with Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) Part II. Should you have any questions or concerns regarding the collection of personal information, please contact the Building Division, King Township, 2585 King Road,

Building Division

Letter of Authorization



Information

Property Address: _____

Legal Description: _____

Roll Number: _____

Personal Information

Name: _____

Phone No.: _____

Address: _____

Email: _____

Authorizing Letter

To Whom it May Concern:

I/We, the above, do give _____ permission to act as our agent in applying to the Township of King for a building permit for the following projects:

(check all that apply)

- Demolition of Accessory Structure
- Demolition of Residential Building
- Demolition of Commercial/Industrial Building
- Construction of Dwelling
- Addition to Dwelling
- Construction of Accessory Structure
- Construction of a Deck
- Construction of Commercial/Industrial Building
- Renovation to Existing Building
- Other: (please specify) _____

Property Owner Signature: _____ Date: _____

Property Owner Signature: _____ Date: _____

Authorized Agent Signature: _____ Date: _____

Building Division Zoning Review Declaration



General Information

Zoning review is a detailed review of proposed construction, demolition and/or development intended to support a building permit application. This review determines zoning compliance and confirms compliance with other applicable law and by-laws. Zoning review is completed by the Planning Department.

Project Information: AGENT/ APPLICANT OWNER

OWNER NAME:

First Last

APPLICANT NAME:

(IF DIFFERENT THAN ABOVE)

First Last

PROPERTY ADDRESS:

Street No. and Name City Postal Code

LEGAL DESCRIPTION:

Lot No. Plan No. Concession

MAILING ADDRESS

(IF DIFFERENT THAN ABOVE)

Street No. and Name City Postal Code

TELEPHONE NUMBER:

EMAIL ADDRESS:

Declaration and Acknowledgement of Applicant

I hereby declare and acknowledge the following:

- I am, the owner as stated above
 the owner's authorized agent
 an officer/employee of _____ which is an authorized agent of the owner

The time period for building permit application review according to OBC 1.3.1.3. Part 1, Division C, cannot be established until all required applicable law approvals, including zoning review, are complete and the approved documents are returned to the Building Division.

The Building Code Act prohibits the issuance of a building permit if proposed construction or demolition will contravene applicable law as defined in the Building Code.

This review does not relieve the owner from complying with the Ontario Building Code, the Act, all applicable by-laws and regulations.

I hereby certify that I have read and agree to the information presented on this page.

Name (please print) Signature Date

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Item	Ontario Building Code Data Matrix Parts 3 & 9							OBC Reference			
1	Project Description:		<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Change of Use		<input type="checkbox"/> Alteration		<input type="checkbox"/> Part 11	<input type="checkbox"/> Part 3	<input type="checkbox"/> Part 9		
									2.1.1 9.10.1.3		
2	Major Occupancy(s)							3.1.2.1.(1)		9.10.2	
3	Building Area (m ²)	Existing _____	New _____	Total _____				1.1.3.2		1.1.3.2	
4	Gross Area	Existing _____	New _____	Total _____				1.1.3.2		1.1.3.2	
5	Number of Storeys	Above grade _____	Below grade _____				3.2.1.1 & 1.1.3.2		2.1.1.3		
6	Height of Building (m)									2.1.1.3	
7	Number of Streets/Access Routes							3.2.2.10 & 3.2.5.5			
8	Building Classification							3.2.2.20-.83		9.10.4	
9	Sprinkler System Proposed		<input type="checkbox"/> entire building <input type="checkbox"/> basement only <input type="checkbox"/> in lieu of roof rating <input type="checkbox"/> not required					3.2.2.20-.83 3.2.1.5 3.2.2.17		9.10.8	
10	Standpipe required		<input type="checkbox"/> Yes <input type="checkbox"/> No					3.2.9			
11	Fire Alarm required		<input type="checkbox"/> Yes <input type="checkbox"/> No					3.2.4		9.10.7.2	
12	Water Service/Supply is Adequate		<input type="checkbox"/> Yes <input type="checkbox"/> No								
13	High Building		<input type="checkbox"/> Yes <input type="checkbox"/> No					3.2.6			
14	Permitted Construction	<input type="checkbox"/> Combustible <input type="checkbox"/> Non-combustible	<input type="checkbox"/> Combustible <input type="checkbox"/> Non-combustible					3.2.2.20-.83		9.10.6	
15	Mezzanine(s) Area m ²							3.2.1.1.(3)-(8)		9.10.4.1	
16	Occupant load based on	<input type="checkbox"/> m ² /person <input type="checkbox"/> design of building						3.1.1.6		9.9.1.3	
	Basement:	Occupancy _____	Load _____	persons							
	1 st Floor	Occupancy _____	Load _____	persons							
	2 nd Floor	Occupancy _____	Load _____	persons							
	3 rd Floor	Occupancy _____	Load _____	persons							
17	Barrier-free Design		<input type="checkbox"/> Yes <input type="checkbox"/> No (Explain)					3.8		9.5.2	
18	Hazardous Substances		<input type="checkbox"/> Yes <input type="checkbox"/> No					3.3.1.2.(1) & 3.3.1.19(1)		9.10.1.3	
19	Required Fire Resistance Rating (FRR)	Horizontal Assemblies		Listed Design No.		3.2.2.20-.83 & 3.2.1.4			9.10.8 9.10.9		
		FRR (Hours)		or Description (SG-2)							
		Floors _____	Hours								
		Roof _____	Hours								
		Mezzanine _____	Hours								
		FRR of Supporting Members		Listed Design No. Or Description (SG-2)							
		Floors _____	Hours								
Roof _____	Hours										
Mezzanine _____	Hours										
20	Spatial Separation – Construction of Exterior Walls							3.2.3		9.10.14	
	Wall	Area of EBF (m ²)	L.D. (m)	L/H or H/L	Permitted Max. % of Openings	Proposed % of Openings	FRR (Hours)	Listed Design or Description	Comb Const	Comb. Constr. Nonc. Cladding	Non-comb. Constr.
	North										
	South										
	East										
West											
21	Other – Describe										

Ontario Building Code Data Matrix – Part 11 – Renovation of Existing Building			OBC Reference
11.1	Existing Building classification:	Describe Existing Use: Construction Index: Hazard Index: <input type="checkbox"/> Not Applicable (no change of major occupancy)	11.2.1 T 11.2.1.1A T 11.2.1.1B to N
11.2	Alteration to Existing Building is:	Basic Renovation <input type="checkbox"/> Extensive Renovation <input type="checkbox"/>	11.3.3.1 11.3.3.2
11.3	Reduction in Performance Level:	Structural: <input type="checkbox"/> No <input type="checkbox"/> Yes By Increase in occupant load: <input type="checkbox"/> No <input type="checkbox"/> Yes By change of major occupancy: <input type="checkbox"/> No <input type="checkbox"/> Yes Plumbing: <input type="checkbox"/> No <input type="checkbox"/> Yes Sewage-system: <input type="checkbox"/> No <input type="checkbox"/> Yes	11.4.2 11.4.2.1 11.4.2.2 11.4.2.3 11.4.2.4 11.4.2.5
11.4	Compensating Construction:	Structural: <input type="checkbox"/> No <input type="checkbox"/> Yes (explain) Increase in occupant load: <input type="checkbox"/> No <input type="checkbox"/> Yes (explain) Change of major occupancy: <input type="checkbox"/> No <input type="checkbox"/> Yes (explain) Plumbing: <input type="checkbox"/> No <input type="checkbox"/> Yes (explain) Sewage system: <input type="checkbox"/> No <input type="checkbox"/> Yes (explain)	11.4.3 11.4.3.2 11.4.3.3 11.4.3.4 11.4.3.5 11.4.3.6
11.5	Compliance Alternatives Proposed:	<input type="checkbox"/> No <input type="checkbox"/> Yes (give number(s))	11.5.1
11.6	Alternative Measures Proposed:	<input type="checkbox"/> No <input type="checkbox"/> Yes (explain)	11.5.2