



THE CORPORATION OF SOUTHWEST OXFORD

Demolition Permit Application Checklist

Permit # _____
(Office use only)

- ✓ This information has been prepared to assist individuals to complete demolition permit applications with minimal delay.
- ✓ A demolition permit will be considered incomplete if the application is not accompanied by answers to the following questions.
- ✓ A demolition permit will NOT be issued until this form is completed and returned to the Building Division.

NO DEMOLITION SHALL BE PERMITTED PRIOR TO A PERMIT BEING ISSUED

Ontario Building Code

1. Does the building exceed 3 storeys in building height? ☐ Yes ☐ No
Number of storeys above grade _____ Number of storeys below grade _____
2. Does the building exceed 600 m² (6,458 ft²)? ☐ Yes ☐ No
3. Does the building contain pre-tensioned or post-tensioned members? ☐ Yes ☐ No
4. Will the proposed demolition extend below the level of the footings of an adjacent building and within the angle of repose of the soil, as drawn from the bottom of such footings? ☐ Yes ☐ No
5. Will there be any explosives or lasers used during the course of demolition? ☐ Yes ☐ No

If the answer to any question 1-5 is YES, the applicant shall, as required by the Building Code Act, retain a Professional Engineer to undertake the general review of the project during demolition. Further, the applicant shall submit, at the time of application, a completed form, "COMMITMENT TO GENERAL REVIEWS BY ARCHITECT AND ENGINEERS", and a letter detailing the structural design characteristics of the building and the method of demolition.

Environmental Considerations

1. Is there now or has there been an industrial use of this site? ☐ Yes ☐ No
2. Are there any fluid storage tanks above or below grade on site? ☐ Yes ☐ No
3. Are there any hazardous products, as defined by WHMIS, on site? ☐ Yes ☐ No
4. Does the building contain any asbestos materials? ☐ Yes ☐ No

If the answer to any question from 1-4 is YES, the applicant must contact an environmental consultant to perform an Environmental Building Audit prior to submission of the demolition permit application.

The Corporation of Southwest Oxford
312915 Dereham Line, Mt. Elgin, Ontario N0J 1N0
Phone (519) 485-0477 Fax: (519) 485-2932 www.swox.org

Utility Disconnect Acknowledgement

N/A

Union Gas

4475 Mainway, Burlington, ON

Fax: (866) 263-0581

Email: add-branplan@uniongas.comApproved By: _____ Date: _____ ☐

Signature: _____

Bell Canada

Ph: 310-BELL

310-2355

Approved By: _____ Date: _____ ☐

Signature: _____

Execulink

1127 Ridgeway Road

Woodstock, ON N4V 1E3

Ph: (519) 456-7200

Mon to Fri: 8:30AM to 5:00PM

Approved By: _____ Date: _____ ☐

Signature: _____

Erie Thames

P.O. Box 157, 143 Bell Street

Ingersoll, ON N5C 2N9

Office: (519) 485-1820

Fax: (519) 485-5838

Email: info@erithamespower.comApproved By: _____ Date: _____ ☐

Signature: _____

Hydro One

Ph: 1-888-664-9376

Email: CustomerCommunications@HydroOne.comApproved By: _____ Date: _____ ☐

Signature: _____

Cable ProviderApproved By: _____ Date: _____ ☐_____
Name of Cable Provider

Signature: _____

If there is an onsite sewage system on the property, it must be decommissioned at the time of demolition and proof shall be submitted in the form of a receipt of the sewage removal by a licensed septic sewage hauler and a visual inspection of the destruction or removal of the septic tank.

If water and waste water services are provided by the county, an inspection is required by the county at the time of demolition to ensure the water and waste water pipes are properly capped off at the property line. Please call the County of Oxford and the Township of Southwest Oxford for inspection.

Applicant's Declaration

Applicant Name: _____ Address of Demolition: _____

I do hereby declare that I am the owner/authorized agent of the named in the above application for a demolition and that the information supplied by me in the application and in the materials filed by me is correct and that I have arranged with the proper authorities for the termination and capping of all services and utilities.

Applicant's Signature: _____ Date: _____

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