

RESIDENTIAL ADDITIONS



PERMITS & INSPECTIONS

PERMIT NO.: _____

OWNERS NAME: _____

PROJECT LOCATION: _____

To be Completed and attached to the Building Permit Application Form

A. Roof

Roof Material _____
Roof Sheathing _____
Rafters _____ x _____ Spacing _____
or Engineered Trusses _____ Spacing _____

B. Ceiling

Insulation _____
Vapour Barrier _____
Ceiling Joist _____ Spacing _____
Ceiling Material _____

C. Walls

Double top plate
_____ x _____ Studs at _____ on Center
Single bottom plate
Insulation _____
Vapour Barrier _____
Wall Sheathing _____
Exterior wall finish _____
Interior finish _____

D. Beam

_____ x _____ ply _____ x _____ species
Supported at _____ on center
_____ columns
_____ x _____ x _____ footing

E. Foundation

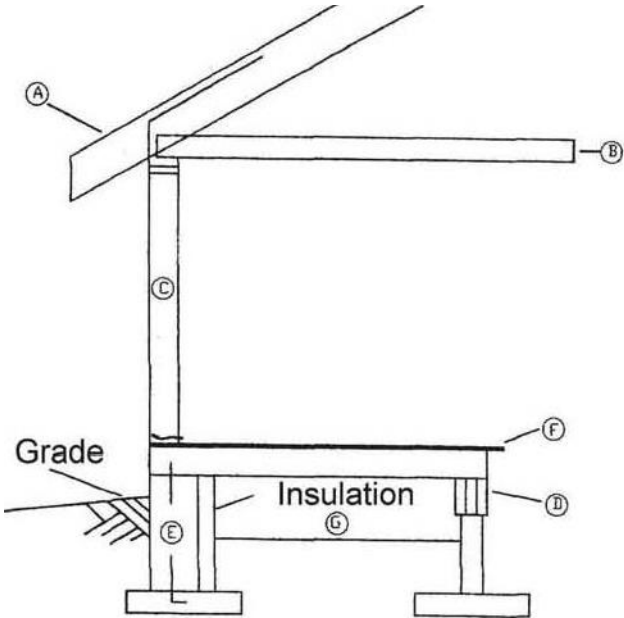
_____ inch Concrete foundation wall at least _____ ft below grad
Footing _____ wide _____ thick

F. Floor

_____ x _____ underlay _____ sub floor
_____ x _____ Joist at _____ on center Species Bridging at 7" on centre

G. Crawl Space

2" sand on 6 mil poly or equal
Ventilation _____
Insulation _____



Comments: