



## Plan Review Checklist – House Addition

**Home Owner/Builders:** The following information is required when submitting an application for a residential building permit and before a building permit is issued. The plan review will not begin until all required information is provided.

### Required Information:

- 2 sets of **Site Plans** with the following information
  - Show size and location of proposed house addition
  - Show size and location of existing buildings on property
  - Show lot dimensions and shape
  - Show distance between buildings and property lines
  - Show North direction arrow
- 2 sets of **House Addition Layout Drawings** with the following information
  - Exterior and Interior wall locations
  - Window sizes and locations
  - Door sizes, locations and swing direction
  - Heating unit/system location
- 2 sets of **House Addition Structural Drawings** with the following information
  - Foundation Detail (type, size, layout and location)
  - Wall Detail (interior and exterior)
  - Roof Detail (eng truss, roof rafters)
  - Floor Detail (eng joists, dimensional lumber)
- 2 copies of the **Mechanical Ventilation Design Summary** filled out by the mechanical contractor
- 2 copies of the **Building Permit Application** properly filled out

**Required On-Site Inspections:** (inspection requirements may change depending on the project type and size)

- Plan Review (Prior to the commencement of any construction)
- Foundation (Prior to pouring concrete on engineered foundations or prior to backfill)
- Framing (Prior to insulating and applying vapour barrier to the exterior walls)
- Insulation and Vapour Barrier (Prior to covering walls and ceiling with wall/gypsum board)
- Final (Prior to moving in or occupying the building)

**Addition Specifications for:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Legal Land Location: \_\_\_\_\_  
Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email: \_\_\_\_\_  
Contractor: \_\_\_\_\_ Ph: \_\_\_\_\_

**Specifications**

**Structural Changes affecting:**

**Walls**

Stud size & spacing: \_\_\_\_\_  
Wall height: \_\_\_\_\_  
Windows: \_\_\_\_\_

Note: *For bedroom windows - No dimension less than 380mm (15") of unobstructed opening for openable portion of window (i.e. 15" x 36") sash must not be supported.*

**Roof & Floor Joists/Trusses**

Type: Vaulted/Cathedral: \_\_\_\_\_ 8 foot: \_\_\_\_\_ Other: \_\_\_\_\_  
Ceiling Insulation: \_\_\_\_\_  
Engineered Trusses (for roof and/or floor joists): \_\_\_\_\_ Other: \_\_\_\_\_  
(If engineered - provide a detail/layout, site specific, stamped by a Structural Engineer)  
Venting of Roof (soffits & roof): \_\_\_\_\_

**Foundation/Beams**

Specifications & plans require a Structural Engineer stamp and must be site specific.

Permit # \_\_\_\_\_  
Town/Village/RM of \_\_\_\_\_  
Date: \_\_\_\_\_

**Health & Safety**

Electrical: GFI in bathroom: \_\_\_\_\_ OR N/A  
Bathroom Venting: Yes \_\_\_\_\_ No \_\_\_\_\_ OR N/A  
Smoke Alarms interconnected with other floors:  
Yes \_\_\_\_\_ No \_\_\_\_\_

(Smoke alarms are required to be 5m from bedroom doors and 15m to any point on the floor level)

**Other**

Fireplace: N/A \_\_\_\_\_ Gas: \_\_\_\_\_  
Electric: \_\_\_\_\_ Other: \_\_\_\_\_  
(Provide fireplace manufacturer's installation specifications)

Describe the addition: \_\_\_\_\_

\*\*\*\* Attach a floor plan sketch showing work to be done.

# Residential Mechanical Ventilation Design Summary *(For systems serving one dwelling)*

The owner is required to have this form filled out (both pages) by the contractor to show the ventilation system has been designed in accordance with the requirements of the current National Building Code.  
***IT IS THE BUILDER'S RESPONSIBILITY TO ENSURE THE ACTUAL INSTALLATION MEETS THE DESIGN.***

Builder		Location	
Name (builder)		Address	
Address (builder)		<b>Ventilation Contractor (if known)</b>	
<b>Total Ventilation Capacity (TVC)</b>		Name	
Required (see page 2) _____ L/s	/01	Address	
<b>Principal Ventilation Capacity (PEC)</b>		<b>System Design</b>	
Minimum Capacity Required = TVC x 50% or x.5 = _____ L/s	/02	SHBA Design Sheet # _____	
Maximum Capacity Permitted = TVC x 75% or .75 = _____ L/s	/03	CMHC Design Option # _____	
Without controlling volume		<b>Designed to CSA-F326-M91</b> _____	
Actual Principal Exhaust Capacity (PEC) (see page 2) = _____ L/s	/04	Exhaust fans with outdoor air supply to forced air furnace return	1
Line /04 must be > line /02 and < line /03 or go to variable Flow control		Exhaust fans with outdoor air supply fan to forced air furnace return	2
		HRV - supply to forced air furnace return, exhaust inlets from rooms	3
If line /04 > line /03 and you do not want variable flow it may be necessary to place a damper in the duct to lower the flow to an acceptable range		HRV - supply and exhaust ducts to forced air furnace return	4
		Exhaust and supply fans to and from rooms ( not connected to furnace)	5
<b>Principal Outdoor Supply Capacity (PSC)</b>		HRV not coupled to a forced air furnace	6
Actual Principal Supply Capacity (PSC) (see page 2) = _____ L/s	/05	CAN/CSA - F326-M91	7
If supply fan is provided the principal supply capacity must match the principal exhaust capacity - Line /05 must = Line /04 and /09 must = line /08		<b>Make-up Air for Exhaust Vents &gt; 75 L/s</b>	
<b>Variable Flow Control for (PEC) or (PSC)</b>		Appliance/Vent (Max) Capacity (Min) Capacity > 75 L/s	1
Reduced Minimum Capacity Required = .9 x (line /02) _____ L/s	/06	Make-up air must be provided between min. and max. capacity above Actual Make-up air provided = _____ L/s	
Reduced Maximum Capacity Permitted = 1.1 x (line /02) _____ L/s	/07	Appliance/Vent (Max) Capacity (Min) Capacity > 75 L/s	2
Reduced Actual Principal Exhaust Capacity = (line /08 must be > than line /06 and < than line /07)	/08	Make-up air must be provided between min. and max. capacity above Actual Make-up air provided = _____ L/s	
Reduced Actual Principal Exhaust Capacity = (line /09 must = line /08)	/09	<b>Kitchen Exhaust Inlet is not the (PEC)</b>	
<b>Supplement Exhaust Capacity (SEC)</b>		Minimum capacity for separate exhaust fan for each kitchen = 50 L/s Kitchen exhaust supplementary fan capacity = _____ L/s	
Minimum SEC = TVC - PEC = (line /01 - line /04) _____ L/s	/10	<b>Bathroom Exhaust Inlet is not prt of (PEC)</b>	
Actual Total SEC meeting some rating (see page 2) (line 15 must be >= line 14) _____ L/s	/11	Minimum capacity for separate exhaust fan in each bathroom = 25L/s Bathroom exhaust supplementary fan capacity = _____ L/s	
<b>HRV (Balance check)</b>		<b>Combustion Air/CO Detector</b>	
If PEC (line /04 > PSC (line /05) then PSC/PEC x 100 must be >= 90%		For all indirect vented appliances and solid fuel burning appliances	
If PSC (line /05 > PEC (line /04) then PEC/PSC x 100 must be >= 90%		Combustion air provided?      Y   N   n/a	
Actual HRV Balance = _____ %		CO Detector provided?        Y   N   n/a	
<b>Certification</b>			
I certify that this ventilation system has been designed in accordance with the requirements of the 1995 National Building Code, section 9.32.3 or to CSA-F326-M91		Name: _____	
		Company: _____	
		Address: _____	
		Telephone: _____	
		Signature: _____	