ACCESSORY BUILDING

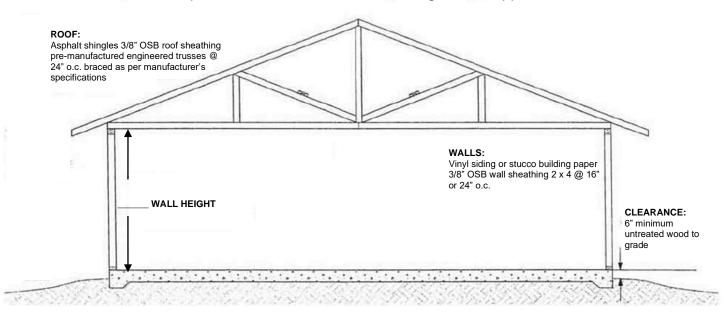


PERMIT NO.:

OWNERS NAME: _____

PROJECT LOCATION: _____

To be completed and attached to the Building Permit Application Form



Please check off construction details as listed below.

Roofing Material Asphalt Shingles Cedar, Pine Shakes/Shingles Metal Roofing Other Specify:	Wall Sheathing Specify: Wall Framing Specify:	NOTE : Separate permit applications are required for the installation of electrical, gas
Roof Sheathing Min. 3/8" OSB or plywood NOTE: OSB or plywood less than ½" requires H clips and bridge blocking	Insulated walls & ceiling Overhead Door Beam Length:	and/or plumbing in the building.
 ☐ 1/2" OSB or plywood ☐ Other Specify: 	Depth:# of Plys	
Roof Framing Pre-manufactured Engineered Truss Roof rafters, ceiling, joists, roof joist (provide details)	Built Up Engineered Overhead Door Door Size:	
Exterior Finish Vinyl Siding Stucco Metal Siding Other Specify: # Yes # Strip footing & 4' frost wall Other Foundation (details, engineering) On Skids	 Direction of Trusses □ Trusses parallel to overhead door opening □ Trusses perpendicular to overhead door opening 	

Calgary Edmonton	25, 2015 - 32 Avenue NE 14613 - 134 Avenue	T2E 6Z3 T5L 4S9	Ph: 403-717-2344 Ph: 780-489-4777	Fax: 403-717-2340 Fax: 780-489-4711	Toll Free Ph: 1-888-717-2344 Toll Free Ph: 1-866-999-4777	Toll Free Fax: 1-888-717-2340 Toll Free Fax: 1-866-999-4711
Lloydminster	Unit 2, 1724 - 50 Avenue	T9V 0Y1	Ph: 780-870-9020	Fax: 780-870-9036		
Red Deer	3, 6264 - 67A Street	T4P 3E8	Ph: 403-358-5545	Fax: 403-358-5085	Toll Free Ph: 1-888-358-5545	Toll Free Fax: 1-866-358-5085
Lethbridge	422 North Mayor Magrath Drive	T1H 6H7	Ph: 403-320-0734	Fax: 403-320-9969	Toll Free Ph: 1-877-320-0734	



PERMIT NO.:

OWNER'S NAME: _____

