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## COMPLEX BUILDING APPLICATION CHECKLIST Interior Alterations, Change of Use

All of the following information is necessary to facilitate a thorough evaluation and timely decision on your application. To expedite the evaluation, all materials submitted must be clear, legible and precise. To achieve this level of customer service, only complete applications that include plans prepared to professional drafting standards will be accepted. Plans/drawings stamped with “not for permit”, “not for permit application”, or similarly identified as not being suitable for the purpose of Building Permit application are not acceptable.

Applications require a pre-screening check prior to formal acceptance. Plans that fail to meet the pre-screening standards will not be accepted and will require amendments and resubmission.

APPLICATION REQUIREMENTS	FOR OFFICE USE
<input type="checkbox"/> APPLICATION FEE	
<input type="checkbox"/> BUILDING PERMIT APPLICATION FORM (SECTION A & SECTION B – PART 4)	
<input type="checkbox"/> STRATA APPROVAL LETTER (IF APPLICABLE)	
<input type="checkbox"/> HOMEOWNERS PROTECTION OFFICE DOCUMENTATION	
<input type="checkbox"/> SCHEDULE A FROM COORDINATING REGISTERED PROFESSIONAL	
<input type="checkbox"/> SCHEDULE B – AS APPLICABLE <input type="checkbox"/> ARCH <input type="checkbox"/> STRUC <input type="checkbox"/> MECH <input type="checkbox"/> PLUMB <input type="checkbox"/> FIRE SUP. <input type="checkbox"/> ELEC	
<input type="checkbox"/> (WHERE APPLICABLE) COPY OF <a href="#">GENERAL WASTE DISCHARGE ASSESSMENT FORM</a> SUBMITTED TO CRD	
<input type="checkbox"/> COPY OF SUBMITTED <a href="#">CRD DESIGN LEVEL CROSS CONNECTION SURVEY FORM</a>	
<b>RESTAURANT OR FOOD HANDLING REQUIREMENTS:</b>	
<input type="checkbox"/> ISLAND HEALTH AUTHORITY APPROVAL	
<input type="checkbox"/> COPY OF SUBMITTED <a href="#">WASTE DISCHARGE ASSESSMENT FORM FOR FOOD SERVICE OPERATIONS</a>	
<input type="checkbox"/> KITCHEN EXHAUST DRAWINGS PREPARED BY A PROFESSIONAL ENGINEER	
<input type="checkbox"/> SEATING PLAN SHOWING NUMBER OF SEATS	
<b>3 SETS OF PLANS (PREFERRED SCALE IS 1/4" = 1', MINIMUM IS 3/16" = 1' (EXCEPT SITE PLAN)) INCLUDING:</b>	
<b>SITE PLAN: METRIC 1:100 or 1:200</b>	
<input type="checkbox"/> INCLUDING BUT NOT LIMITED TO, FULL DIMENSIONS OF THE LOT, NORTH ARROW, SCALE, ADJACENT STREETS AND LANES, INDICATE ALL EXISTING AND PROPOSED BUILDINGS WITH LOCATIONS AND SETBACKS DIMENSIONED	
<input type="checkbox"/> STREET ADDRESS AND LEGAL DESCRIPTION	
<input type="checkbox"/> PROJECT DATA TABLE (INCLUDING HEIGHT, SETBACKS, FLOOR AREA, NUMBER OF STOREYS, SITE COVERAGE AND OTHER RELEVANT DATA)	
<input type="checkbox"/> SHOW ALL TREES ON THE PROPERTY AND ADJACENT BOULEVARD AND INCLUDE INFORMATION ON SPECIES AND DIAMETER OF EACH	

APPLICATION REQUIREMENTS, CONTINUED	FOR OFFICE USE
<b>FLOOR PLANS</b>	
<input type="checkbox"/> INTERIOR DIMENSIONS, MEASURED FROM THE INTERIOR FACE OF EXTERIOR WALLS AND INCLUDE TOTAL FLOOR AREA OF EACH FLOOR	
<input type="checkbox"/> LOCATION AND DIMENSIONS OF DOORS AND WINDOWS; ROOMS LABELLED WITH INTENDED USE	
<input type="checkbox"/> SHOW FOUNDATION AND CRAWLSPACE AREAS	
<b>ELEVATIONS</b>	
<input type="checkbox"/> LABELLED ELEVATION DRAWINGS OF ALL SIDES OF THE BUILDING	
<input type="checkbox"/> LOCATION AND DIMENSIONS OF ALL WINDOWS, DOORS, OPENINGS, ENTRY STAIRS AND DECKS	
<b>CROSS SECTION</b>	
<input type="checkbox"/> CROSS SECTION DIMENSIONED AND INDICATING TYPICAL CONSTRUCTION ASSEMBLIES, CEILING HEIGHTS AND REFERENCED TO GRADE	
<input type="checkbox"/> STAIR DIMENSIONS	

FOR OFFICE USE:								
BUILDING INSPECTOR: _____								
BLDG	PLUM	ELEC	ZON	FIRE	PARKS	LAND	U/G	TRAN
<input type="checkbox"/>	<input type="checkbox"/> <b>NO</b> SERVICE UPGRADE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>
	<input type="checkbox"/> <b>YES</b> SERVICE UPGRADE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>N/A</b> (NO PLUMBING)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>
<b>FIRE</b>	REQUIRED FOR CHANGE OF USE OF FIRE ALARM PERMITS. N/A OTHERWISE							
<b>ZON</b>	N/A IF: NOT HERITAGE; NO CHANGE OF USE; NOT FOR RESTAURANT, MEDICAL CLINIC OR DENTAL OFFICE							
<b>ELEC</b>	REQUIRED FOR FIRE ALARM PERMITS. N/A OTHERWISE							
SCREENED BY:					DATE:			
PROJECT ADDRESS:								