



# Commercial Building Permit Designer's Building Code Analysis Sheet

Required for New Buildings, Additions and Change of Occupancy Permit Application

## Building Information

Project Name: \_\_\_\_\_  
 Project Description: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Building Area: \_\_\_\_\_ Existing: \_\_\_\_\_ m2 + New: \_\_\_\_\_ m2 = Total: \_\_\_\_\_ m2  
 Storeys Above Grade: \_\_\_\_\_ Storeys Below Grade: \_\_\_\_\_  
 Number of Street (as defined by 3.2.2.10): \_\_\_\_\_  
 Use(s) of the Building (i.e. restaurant, warehouse, apartment, etc.): \_\_\_\_\_  
 Major Occupancy Classification(s) (circle all that apply): A1 A2 A3 A4 B1 B2 C D E F1 F2 F3  
 Building Code this project is designed to conform to: \_\_\_\_\_  
 Building Code Classification(s) under 3.2.2. of the NBC: \_\_\_\_\_

## Allowable Unprotected Openings:

North Wall (%) \_\_\_\_\_ South Wall (%) \_\_\_\_\_ East Wall (%) \_\_\_\_\_ West Wall (%) \_\_\_\_\_  
 Required Exterior Wall Fire Resistance Ratings:  
 North Wall (hrs) \_\_\_\_\_ South Wall (hrs) \_\_\_\_\_ East Wall (hrs) \_\_\_\_\_ West Wall (hrs) \_\_\_\_\_

Occupant Load: \_\_\_\_\_  
 Water Closets Required: Male: \_\_\_\_\_ Female: \_\_\_\_\_ Water Closets Provided: Male: \_\_\_\_\_ Female: \_\_\_\_\_

Number of Exits Required: \_\_\_\_\_ Floor Area(s): \_\_\_\_\_ Mezzanine(s): \_\_\_\_\_  
 Public Corridor Separations (check one):  
 Fire Separation Required:  Yes  No Fire Resistance Rating Required:  N/A  3/4 Hour  1 Hour  
 Maximum Travel Distance: \_\_\_\_\_ Minimum Exit Width Required: \_\_\_\_\_

## Provide Required Fire Resistance Ratings (In Hours):

Floors: _____	Mezzanine: _____	Roof: _____
Bearing Assemblies _____	Fire Walls _____	Exit Stairways _____
Service Shafts _____	Furnace Rooms _____	Storage Rooms _____
Storage Garages _____	Repair Garages _____	Occupancy Separations _____
Suite Separation _____	Other(Specify) _____	Other (Specify) _____

## Other Information (check yes or no for each question):

Exit Signs Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Emergency Lighting Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Standpipe & Hose System Required/? <input type="checkbox"/> Yes <input type="checkbox"/> No	Smoke Alarms Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Fire Alarm System Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Barrier Free Access Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Sprinkler System Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire Dampers Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Attic Fire Stops Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Piping Fire Stops Required? <input type="checkbox"/> Yes <input type="checkbox"/> No

## Professional Designer Information:

Name of qualified professional designer who has completed this form: \_\_\_\_\_  
 Firm: \_\_\_\_\_  
 Address: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 \_\_\_\_\_ Phone: \_\_\_\_\_  
 \_\_\_\_\_ Fax: \_\_\_\_\_

Return to the City of Weyburn, Building Department  
 Box 370, 157 3<sup>rd</sup> Street N.E., Weyburn, SK S4H 2K6, ph 306-848-3221, fax 306-842-2001