

**NATIONAL BUILDING
CODE OF CANADA FORM
(FC/NBCC-LONG FORM)
(PART 3 BUILDINGS)**

Fee Schedule

1

NO CONSTRUCTION (IF NO CONSTRUCTION IS BEING CARRIED OUT).....	NO FEE
BUILDINGS LESS THAN 250 m ² IN TOTAL FLOOR AREA.....	\$60
BUILDINGS GREATER THAN 250 m ² AND LESS THAN 600 m ² IN TOTAL FLOOR AREA.....	\$240
BUILDINGS GREATER THAN 600 m ² IN TOTAL FLOOR AREA.....	\$480

APPROVAL FEE MUST ACCOMPANY APPLICATION

MAKE CHEQUE OR MONEY ORDER PAYABLE TO NEWFOUNDLAND EXCHEQUER ACCOUNT

Structure Information

2

NAME OF STRUCTURE			
LOCATION			
NAME OF ARCHITECT			
NAME OF M&E ENGINEERING FIRM			
NAME OF DESIGNER (OTHER THAN ABOVE)			
NAME OF AGENCY ISSUING BUILDING PERMIT	HAVE PLANS BEEN SUBMITTED TO THIS AGENCY? <input type="checkbox"/> YES <input type="checkbox"/> No		
PART OF NBCC – CURRENT EDITION UNDER WHICH THE BUILDING HAS BEEN DESIGNED:	<input type="checkbox"/> PART 3		<input type="checkbox"/> PART 9

Description of Proposed Work

3

<input type="checkbox"/> NEW BUILDING	<input type="checkbox"/> ADDITION	<input type="checkbox"/> RENOVATION	<input type="checkbox"/> CHANGE OF OCCUPANCY
<input type="checkbox"/> CHANGE OF OCCUPANT (NO CONSTRUCTION UNDERTAKEN)			

Building Classification

4

OCCUPANCY:											
GROUP:	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E	<input type="checkbox"/> F	DIVISION:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
NBCC REFERENCE:											

Type of Construction

5

<input type="checkbox"/> NON-COMBUSTABLE	<input type="checkbox"/> COMBUSTIBLE	<input type="checkbox"/> COMBINATION OF BOTH	NBCC REFERENCE:
--	--------------------------------------	--	--------------------

Building Area (As defined)

6

AREA OF BASEMENT, CELLAR, OR CRAWL SPACE:	AREA OF THE FIRST STORY:	AREA OF THE SECOND STORY:
AREA OF THE THIRD OR OTHER STORIES:		BUILDING HEIGHT, GRADE TO TOP OF FLOOR OF HIGHEST STORY:
Is THIS BUILDING CONSIDERED A HIGH RISE? <input type="checkbox"/> YES <input type="checkbox"/> No		NBCC REFERENCE:

Building Faces (Indicate streets and parking area on site plan)

7

<input type="checkbox"/> ONE STREET	<input type="checkbox"/> TWO STREETS	<input type="checkbox"/> THREE STREETS	<input type="checkbox"/> FOUR STREETS	NBCC REFERENCE:
-------------------------------------	--------------------------------------	--	---------------------------------------	--------------------

8 Occupant Load (Indicate specific areas as per classification and allowable square feet per person, upon which occupant load is calculated. Indicate total number of persons in each area. *Life Safety Code* should be used in this calculation.)

NBCC REFERENCE:

9 Exposed Building Face

LIMITING DISTANCE ALLOWED:	MAXIMUM ALLOWABLE % UNPROTECTED OPENINGS:	DISTANCE TO NEAREST BUILDING:
ANY WINDOWS OR DOORS EXPOSED IN BETWEEN THE BUILDING?		<input type="checkbox"/> YES <input type="checkbox"/> No
		NBCC REFERENCE:

10 Building Serviced With

SPRINKLER SYSTEM?	<input type="checkbox"/> YES <input type="checkbox"/> No	IF YES, SPECIFY TYPE:	<input type="checkbox"/> WET <input type="checkbox"/> DRY <input type="checkbox"/> DELUGE
MUNICIPAL WATER SYSTEM?	<input type="checkbox"/> YES <input type="checkbox"/> No	WATER SUPPLY FOR FIREFIGHTING:	<input type="checkbox"/> HYDRANT <input type="checkbox"/> NATURAL <input type="checkbox"/> STATIC
DISTANCE TO NEAREST HYDRANT(S):		METERS	

11 Floor Assembly

CONSTRUCTION:		
FIRE RESISTANCE RATING:	ANY UNPROTECTIVE VERTICAL OPENINGS? <input type="checkbox"/> YES <input type="checkbox"/> No	
NBCC REFERENCE:		

12 Roof Assembly

CONSTRUCTION:		
UNDERSIDE FIRE RESISTANCE RATING:	NBCC REFERENCE:	

13 Fire Resistance Rating

	FIRE RESISTANCE RATING	CONSTRUCTION
CEILINGS AND WALLS		
LOAD BEARING WALLS		
COLUMNS AND ARCHES		
FIRE SEPARATIONS		
MEZZANINES		
FURNACE ROOMS		
ELECTRICAL ROOMS		
FLAMMABLE LIQUID STORAGE ROOMS		
NBCC REFERENCE:		

14 Roof Assembly

AREA OVER 500 m²:	AREA OVER 1000 m²:	NBCC REFERENCE:
-------------------------------------	--------------------------------------	------------------------

15 Fire Walls

CONSTRUCTION:		
FIRE PROTECTION RATING:	HEIGHT OF PARAPET ABOVE ROOF:	NBCC REFERENCE:

16 Interior Finish (Walls and Ceiling)

PRIME CONSTRUCTION:	FINAL COATING OR COVERING USED:	NBCC REFERENCE:
----------------------------	--	------------------------

17 Exits And Access to Exits. (Areas Are Based On):

NUMBER OF PERSONS AS DETERMINED BY CAPACITY FACTOR AS PER: CHAPTER 7 NFPA 101 LIFE SAFETY CODE.	HORIZONTAL EXITS? <input type="checkbox"/> YES <input type="checkbox"/> No
MAXIMUM TRAVEL TO EXITS BASED ON _____ METERS	WIDTH OF CORRIDORS USED TO ACCESS EXITS: _____ METERS
NUMBER OF UNITS OF EXIT REQUIRED PER FLOOR AREA:	TYPE OF HARDWARE ON EXIT DOORS:
SIZE OF SMOKE BARRIER DOORS:	NBCC REFERENCE:

18 Interior Fire Protection

	YES	No	TYPE	CLASS	SIZE
STANDPIPES	<input type="checkbox"/>	<input type="checkbox"/>			
AUTOMATIC FIRE EXTINGUISHING SYSTEM	<input type="checkbox"/>	<input type="checkbox"/>			
FIRE EXTINGUISHERS	<input type="checkbox"/>	<input type="checkbox"/>			
FIRE ALARM SYSTEMS	<input type="checkbox"/>	<input type="checkbox"/>			
EMERGENCY LIGHTS	<input type="checkbox"/>	<input type="checkbox"/>			
EXIT LIGHTS	<input type="checkbox"/>	<input type="checkbox"/>			
SMOKE DETECTORS	<input type="checkbox"/>	<input type="checkbox"/>			
SMOKE ALARMS	<input type="checkbox"/>	<input type="checkbox"/>			
PANIC HARDWARE	<input type="checkbox"/>	<input type="checkbox"/>			
OTHER (SPECIFY):	<input type="checkbox"/>	<input type="checkbox"/>			

19 Heating System

<input type="checkbox"/> ELECTRICAL <input type="checkbox"/> OIL <input type="checkbox"/> SOLID FUEL	TYPE OF SYSTEM:
TYPE OF CHIMNEY: <input type="checkbox"/> MASONRY <input type="checkbox"/> PREFAB	DUCT TYPE SMOKE DETECTORS IN WARM AIR CIRCULATING SYSTEMS <input type="checkbox"/> Yes <input type="checkbox"/> No

20 Ventilation and Air Conditioning System

FIRE DAMPER REQUIREMENT <input type="checkbox"/> Yes <input type="checkbox"/> No	SMOKE DETECTION REQUIREMENT <input type="checkbox"/> Yes <input type="checkbox"/> No	AIR CIRCULATING FAN AUTOMATIC SHUTDOWN <input type="checkbox"/> Yes <input type="checkbox"/> No
---	---	--

21 Provisions for Disabled Provided

COMPLIANCE WITH APPLICABLE NL REGULATIONS <input type="checkbox"/> Yes <input type="checkbox"/> No

22 Additional Requirements for High Building

BUILDING HEIGHT: _____ METERS	VENTING SYSTEM? <input type="checkbox"/> Yes <input type="checkbox"/> No	
PRESSURIZED AREAS <input type="checkbox"/> Yes <input type="checkbox"/> No	ELEVATOR REQUIREMENTS <input type="checkbox"/> Yes <input type="checkbox"/> No	VOICE COMMUNICATION SYSTEM <input type="checkbox"/> Yes <input type="checkbox"/> No

Fire Stopping

23

FIRE STOPPING IN ACCORDANCE WITH REQUIREMENTS OF NATIONAL BUILDING CODE OF CANADA

YES NO

F-1 Classification

24

FLAMMABLE OR COMBUSTIBLE LIQUID STORAGE **YES** **NO**

Yes No

Code Checks

25

LIFE SAFETY CODE CHECK MADE **YES** **No** **NATIONAL FIRE CODE OF CANADA CHECK MADE**

YES NO

Yes No

APPLICABLE CODES AND STANDARDS CHECKS MADE

YES NO

Detailed Explanation, if Required

26

Please Print Clearly in Ink

27

This is to certify that this form has been completed to the best of my ability and that the building or part of the building identified herein has been designed and will be constructed in accordance with the provisions of the latest edition of the ***National Building Code of Canada***, ***National Fire Code of Canada*** and the ***Life Safety Code***.

NAME (PLEASE PRINT)		TITLE	
CURRENT MAILING ADDRESS			POSTAL CODE
TELEPHONE NUMBER	FAX NUMBER	EMAIL ADDRESS	
SIGNATURE OF DESIGNER		SEAL OF PROFESSIONAL DESIGNER	
DATE (YY/MM/YDD)			

General Notes and Requirements**28**

1. This form shall be completed where the project design requirements are under Part 3 of the *National Building Code of Canada*.
2. This form must be fully completed, stamped and signed by the Professional Architect or Engineer responsible for the design.
3. Design drawings submitted for approval in hardcopy shall be drawn to a recognized scale and limited to 11" x 17" (A3) format or smaller.
4. Drawings shall be stamped with the seal of a Professional Architect or Engineer and signed and dated.
5. Fire Suppression (sprinkler, hose, and standpipe) and Early Warning (fire alarm) system drawings and specifications, where required by the *National Building Code of Canada*, shall be included as part of the application, or indicate that they will follow. These drawings and specifications shall be submitted by a contractor licensed and listed with Newfoundland and Labrador Fire and Emergency Services.
6. This application form and one copy of the drawings shall be forwarded to the local Service NL office. One copy of this form and one copy of drawings shall be forwarded to the local Municipal Council. An Approval in Principal Letter from the Town Clerk or Manager and the appropriate fees as outlined on the front page of this form shall be included with all applications submitted to Service NL. Where no Municipal Council exists, the information may be submitted directly to the local Service NL office.
7. The applicable *National Building Code*, *National Fire Code*, and/or the *Life Safety Code* references shall be identified in each section of this form.
8. A letter approving plans, stating the conditions of approval and any recommendations made will be issued after a complete review of the plans and this form. This letter and the approved stamped drawings by Service NL, on behalf of Newfoundland and Labrador Fire and Emergency Services, will be forwarded to the applicant and copied to the Municipal Council. Where no Municipal Council exists documentation will be forwarded to the applicant.
9. Approved drawings including materials and equipment specified on this form cannot be altered or substituted without prior written approval of the local Service NL office.
10. A copy of this form shall be retained by the applicant for future reference.

29**Please submit completed form and design drawings to one of the following Service NL offices:**

ST. JOHN'S MOTOR REGISTRATION BLDG. 149 SMALLWOOD DRIVE P.O. Box 8700 ST. JOHN'S, NL, A1B 4J6 TELEPHONE: (709) 729-1038 FACSIMILE: (709) 729-2071 EMAIL: GSCAVALONPLANS@GOV.NL.CA	HARBOUR GRACE P.O. Box 512 7-9 RODDICK CRESCENT HARBOUR GRACE, NL A0A 2M0 TELEPHONE: (709) 945-3107 FACSIMILE: (709) 945-3114 EMAIL: GSCAVALONPLANS@GOV.NL.CA	CLARENVILLE 8 MYERS AVENUE SUITE 201 CLARENVILLE, NL A5A 1T5 TELEPHONE: (709) 466-4060 FACSIMILE: (709) 466-5674	GANDER FRASER MALL 230 AIRPORT BLVD. P.O. Box 2222 GANDER, NL, A1V 2N9 TELEPHONE: (709) 256-1420 FACSIMILE: (709) 256-1438
GRAND FALLS-WINDSOR 3 CROMER AVENUE GRAND FALLS-WINDSOR, NL A2A 1W9 TELEPHONE: (709) 292-4206 FACSIMILE: (709) 292-4528	CORNER BROOK SIR RICHARD SQUIRES BUILDING 84 MOUNT BERNARD AVENUE P.O. Box 2006 CORNER BROOK, NL, A2H 6J8 TELEPHONE (709) 637-2204 FACSIMILE: (709) 637-2681	HAPPY VALLEY-GOOSE BAY P.O. Box 3014, STATION B 2 TENTH STREET HAPPY VALLEY-GOOSE BAY, NL A0P 1E0 TELEPHONE: (709) 896-5428 FACSIMILE: (709) 896-4340	

Privacy Note

The Engineering and Inspection Services Division of Service NL collects personal information relating to fire and life safety under the authority of the *Fire Protection Services Act*. Personal information collected by the Government of Newfoundland and Labrador is protected under the *Access to Information and Protection of Privacy (ATIPP) Act*. If you have any questions about the collection or use of this information, please contact a Service NL representative at your nearest Service NL office.