

# **ACCESSORY BUILDING**

## **DETACHED GARAGE**

### **Requirements:**

- **PERFORMANCE SECURITY**
- **DEVELOPMENT PERMIT APPLICATION**
- **BUILDING PERMIT APPLICATION**
- **SITE PLAN**
- **INFORMATION SHEET**
- **FIRE SAFETY PLAN**
- **LOCATE SLIP FROM ATCO GAS**
- **INSPECTION INFORMATION SHEET**



# Town of Strathmore

680 Westchester Road  
Strathmore, AB T1P 1J1  
Phone: (403) 934-3133  
Fax: (403)934-4713

## DEVELOPMENT PERMIT APPLICATION FORM Land Use By-Law No. 14-11

I/We hereby make application for a development permit under the provisions of the Land Use By-Law in accordance with the plans and supporting information submitted herewith which form part of this application.

**This document does not, in any way, relieve the applicant from any requirements imposed by way of caveat or restrictive covenant on the title of the property.**

File No. \_\_\_\_\_ Fees: \_\_\_\_\_ Offsite Levies: \_\_\_\_\_

**Applicant** \_\_\_\_\_ **Tel. No.** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **Fax. No.** \_\_\_\_\_

**City/Town** \_\_\_\_\_ **Prov.** \_\_\_\_\_ **Postal Code** \_\_\_\_\_

**Email:** \_\_\_\_\_ (please print clearly)

**Affected Property (the lands):**

**Registered Owner of Land** \_\_\_\_\_

**Address** \_\_\_\_\_ **Tel. No.** \_\_\_\_\_

**City** \_\_\_\_\_ **Prov.** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Property Address** \_\_\_\_\_

**Lot** \_\_\_\_\_ **Block** \_\_\_\_\_ **Plan** \_\_\_\_\_

**Proposed Development / Project:** \_\_\_\_\_

**Present Land Use Designation / Zoning:** \_\_\_\_\_

**Existing Use of Land or Building:** \_\_\_\_\_

**Estimated Commencement Date:** \_\_\_\_\_ **Estimated Completion Date:** \_\_\_\_\_

**Other Supporting Material Attached:** \_\_\_\_\_

**Right of Entry**

I hereby authorize the Town of Strathmore to enter the land(s) for the purpose of conducting a site inspection in connection with my application for development approval.

This right is granted pursuant to Municipal Government Act.

**Confirmation of Application:**

\_\_\_\_\_ hereby certify that I am the  
(Signature) (Print)  
Registered Owner or am the applicant and authorized to act on behalf of the Registered Owner  
Applicant \_\_\_\_\_ Date \_\_\_\_\_

Please return any correspondence by: (choose one)  
If none chosen, or if information provided is unclear, ordinary mail will be the default choice

- Ordinary Mail (Canada Post)
- Email (email address must be provided on pg. 1)
- Fax (fax # must be provided on pg. 1)

**Notes:**

1. Upon our receipt of this completed application and any required background or accompanying material, the Planning Department has up to 40 days to process the application, during which time the Development Officer may exercise his discretion to approve/refuse or refer the application to the Town of Strathmore Council for their approval / refusal.
2. This is not a building permit; applicable building gas, electrical, and plumbing permits must be obtained prior to taking occupancy or commencing construction.

This information is being collected under *the Municipal Government Act* and will only be used for the purpose of Building & Development Application. It is protected by the provisions of the Freedom of Information & Protection of Privacy Act. If you have any questions about the collection please contact the FOIP Coordinator at 934-3133, weekdays.



# Town of Strathmore

680 Westchester Road  
 Strathmore, AB T1P 1J1  
 e-mail: [development@strathmore.ca](mailto:development@strathmore.ca)  
 Phone: 403-934-3133 Fax: 403-934-4713

## Permit Label

### BUILDING PERMIT APPLICATION

<b>To be completed by Town Staff</b>	Development fee		
Development Permit #	Calgary Growth Charge		
Building Permit #	Water meter fee		
Date:	Building Permit fee		
Date of receipt of complete application	Safety Codes Council fee		
	<b>Total payable</b>		

<b>To be completed by Owner or applicant</b>		
Project Civic Address		
Legal Address Lot	Block	Plan
Construction Value \$	Area (Ft <sup>2</sup> or m <sup>2</sup> )	
<b>TYPE OF PROJECT</b> (check applicable box)		
<input type="checkbox"/> Residential New Single Family Dwelling	<input type="checkbox"/> Single Family Addition	<input type="checkbox"/> Single Family Renovation
<input type="checkbox"/> Residential Semi-Detached / Duplex Dwelling(s)	<input type="checkbox"/> Basement Development	<input type="checkbox"/> Deck
<input type="checkbox"/> Residential Manufactured / Modular Home	<input type="checkbox"/> Shed	<input type="checkbox"/> Detached Garage
<input type="checkbox"/> Residential Multi-family _____ # of dwelling units	<input type="checkbox"/> Hot Tub	<input type="checkbox"/> Wood Burning Appliance
<input type="checkbox"/> Commercial    A. <input type="checkbox"/> New building <input type="checkbox"/> Renovation    B. <input type="checkbox"/> Office/Personal Service <input type="checkbox"/> Retail <input type="checkbox"/> Assembly (restaurant/drinking)		
<input type="checkbox"/> Industrial    A. <input type="checkbox"/> New Building <input type="checkbox"/> Renovation    B. <input type="checkbox"/> F3 Light Hazard <input type="checkbox"/> F2 Medium Hazard		
<input type="checkbox"/> Other (if not listed above): describe project		

Estimated start date of construction:	
Estimated completion date of construction:	

<b>OWNER NAME:</b>		
Address:		Phone:
City:		Cell:
Prov:	Postal Code:	Fax:
E-mail address:		

<b>CONTRACTOR NAME:</b>		
Address:		Phone:
City:		Cell:
Prov:	Postal Code:	Fax:
E-mail address:		

<b>APPLICANT NAME:</b>		
Address:		Phone:
City:		Cell:
Prov:	Postal Code:	Fax:
E-mail address:		

List of Contractors Responsible for the Following Disciplines (if applicable)		
HVAC	Name:	Ph #
Electrical	Name:	Ph #
Plumbing	Name:	Ph #
Gas	Name:	Ph #

*I authorize the appropriate officers of the Town of Strathmore the right to access the property for the purpose of any necessary inspection in conjunction with this application. The undersigned hereby agrees to build according to the approved permits, information above, Plan Examination Report, and plans and specifications herewith submitted and agrees to comply with all Town Bylaws and Safety Code requirements.*

I (print name),		hereby certify that:
	I am the owner.	
	I have been designated as the representative or agent of the owner, and I am aware that it is my responsibility to obtain all approvals from the land owner.	
I have read and understand this application in its completed form.		
SIGNATURE:		DATE:

**DECISION**

This Permit is valid for one year from the date of issuance. If this project is not complete within the one year time limit, an extension must be applied for or the Permit will be deemed to be expired and a new Permit will be required.

Date of issuance of Permit: \_\_\_\_\_

Safety Codes Officer: \_\_\_\_\_

Designation Number: \_\_\_\_\_

The Town of Strathmore is the Authority Having Jurisdiction and the Issuing Municipality

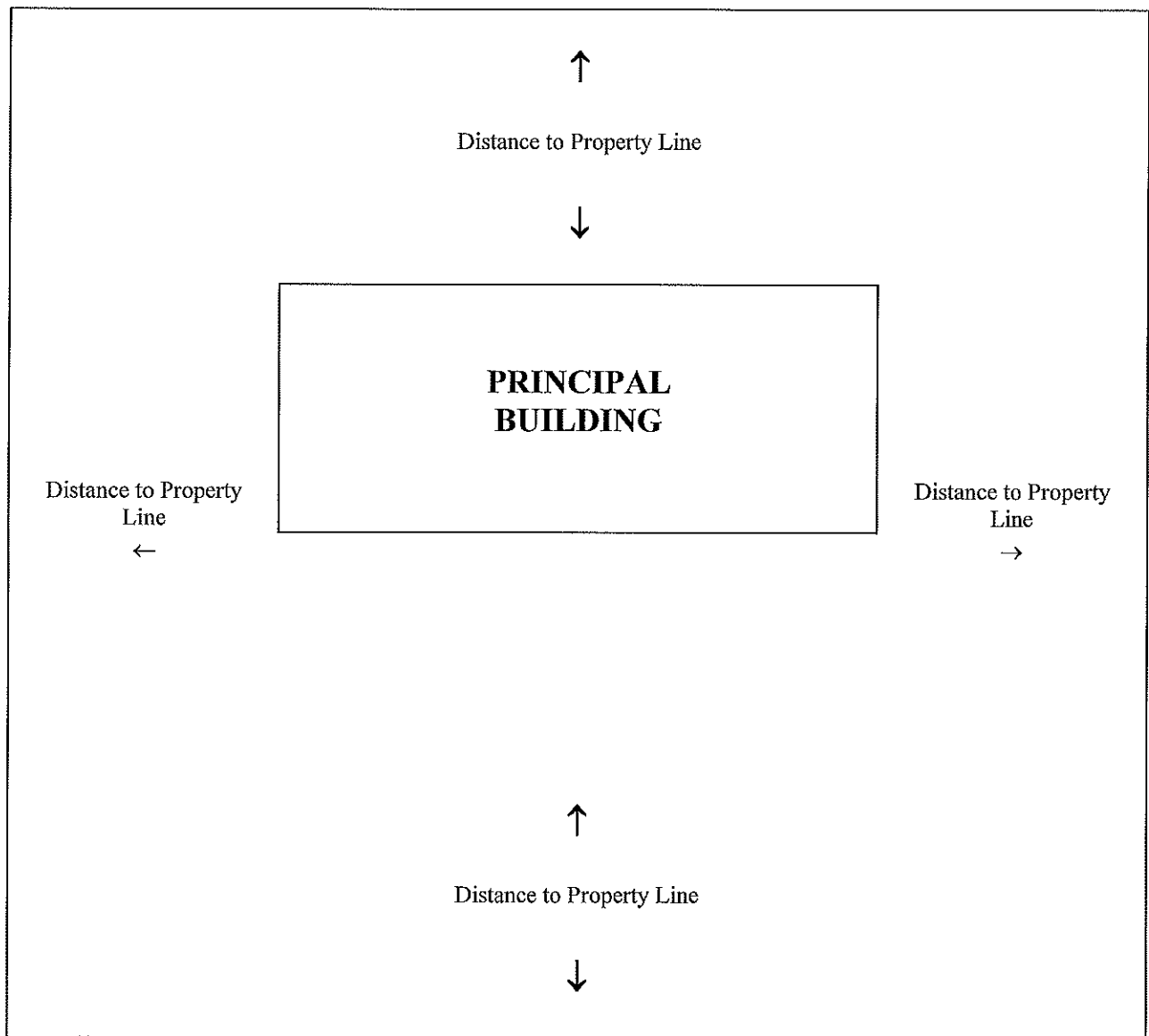
**Protection of Privacy** - The personal information requested on this form is collected under the authority of the *Safety Codes Act*, the *Municipal Government Act* and Section 33 (c) of the *Alberta Freedom of Information and Protection of Privacy Act*. It will be used for the purpose of issuing permits, Safety Codes compliance verification and monitoring and property assessment purposes. The name of the permit holder and the nature of the permit is public information and will be released to the public upon request. Direct any questions about this collection to the Town of Strathmore FOIP Coordinator at 403-934-3133, weekdays.

**SITE PLAN for DETACHED GARAGE  
or**

**PROVIDE A COPY OF REAL PROPERTY REPORT  
(indicate size, location of man door, windows, side & rear yard setbacks)**

**Provide the Town of Strathmore with a Gas Line Locate Slip from Gas Company  
Locate of Gas Line: AB First Call 1 – 800 – 242 – 3447**

**STREET**



**ALLEY (REAR YARD)**



Town of Strathmore  
 680 Westchester Road  
 Strathmore, AB  
 T1P 1J1  
 403-934-3133

**Detached Garage Information Sheet based on 2014 Alberta Building Code**  
 (to be completed and submitted with Building Permit Application)

<b>ADDRESS</b>	
<b>DRAWINGS TO BE PROVIDED</b>	
Plan view drawing showing dimensions of garage and distances to any property lines within 5 meters?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Plan view shows approximate size and locations of other buildings on the property?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Plan view shows the adjacent street and/or alley?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Elevation drawings showing the location and sizes of windows and door?	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>FOUNDATION</b>	
Garage size equal to or less than 55 m <sup>2</sup> (592 ft <sup>2</sup> ) (engineering not required)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Engineered stamped drawing included for garage size greater than 55 m <sup>2</sup> (592 ft <sup>2</sup> )?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Engineer to provide verification letter confirming foundation construction to design when foundation complete?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<b>CONSTRUCTION ABOVE GRADE</b>	
Garage material package provided by:	
<b>Wall construction</b>	
2 X 4 studs, double top plates and bottom plates?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2 X 6 studs, double top plates and bottom plates?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Bottom wall plate pressure treated if top of slab less than 150 mm (6 inches) to grade?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Windows and doors eliminated from walls less than 1.2 meters (4 feet) to property line?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Exterior cladding to be vinyl siding?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Other exterior cladding, specify type and appearance.	
Man door is 760 mm (30 inches) or greater in width?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5/8" Type X Drywall installed on the inside face of any wall less than 600 mm (24 inches) to property line?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<b>Roof construction</b>	
Engineered trusses provided by building materials supplier?	Yes <input type="checkbox"/> No <input type="checkbox"/>

H clips to be installed at sheathing joints if less than 12.5 mm thick and 2 X 4 blocking at roof peak between rafters?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Asphalt shingles	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If using roofing material other than asphalt shingles, please specify.		
Soffit blocked off or using non-perforated soffit where any portion of the soffit is less than 1.2 meters (4 feet) to property line?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>CONTRACTOR (if other than the owner)</b>		
Name		
Company name		
Address		
City, Province	Postal Code	
Phone	Fax	
E-mail		
<b>OTHER INFORMATION</b>		
Locate slip identifying the location of underground natural gas lines been included with the application? The detached garage cannot be located over the natural gas line. Gas Code.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

### Garage Size and Height Limitations

Maximum of 13% site coverage OR 75 sq. meters whichever is the lesser.

Maximum height is 5 meters (16.4 feet) measured from grade to the roof peak

### Side Yard Setbacks:

1. Minimum of 0.6 meters (24 inches) from a side property line shared with an internal lot;
2. \*\*1.0 m. from a side property line shared with an Internal Lot if one side of the Accessory Building is located less than 1.0 m from a side property line shared with an Internal Lot and the rear property line of the lot is shared with a lane;
3. Minimum of 3.0 meters (9.84 feet) from a side or rear property line shared with a street or lane unless the vehicular entrance to the garage faces the street or lane in which case, the Rear Yard Setback requirements apply below.

### Rear Yard Setbacks: All Lots

1. If the vehicular entrance to the garage faces the rear lane and the lane is 6.0 meters in width, the minimum setback is 2.0 meters (6.56 feet)
2. If the vehicular entrance to the garage faces a street, the minimum setback is 6.0 meters

Note: The \*\*1.0 meter Side Yard Setback requirement may be reduced to 0.6 meters (24 inches) on one side if the property line is shared with an internal lot and the special building code requirements have been met. For detailed information on Accessory Building setbacks, please refer to Land Use Bylaw #14-11.



## **Other requirements**

- 1) Wall construction
  - a) Bottom plate to be fastened to slab with anchor bolts at 2.4 m (8 feet) or secured with concrete nails between every second stud
  - b) Lintels over windows and man door to be two ply and supported with cripples down to bottom plate
  - c) Exterior finish to be similar to house
- 2) Overhead Door Header Size
  - a) non-load bearing 16 foot opening –min 2 ply 2x12 spruce
  - b) load bearing 16 foot opening – min 4 ply 2x12 spruce
  - c) non-load bearing 9 foot opening – min 2 ply 2x8 spruce or
  - d) load bearing 9 foot opening – min 3 ply 2x10 spruce
- 3) Roof construction
  - a) Roof trusses to be secured to top plates with 3 nails at each end or hurricane clips

## **APPLICATION FOR PERMITS**

1. **Application form for Development Permit**
2. **Application form for Building Permit**
3. **Include a site plan drawing with Permit application showing :**
  - a) Dimensions of the building
  - b) Setbacks to property lines and to the house
  - c) Man door location and size
  - d) Window location(s) and size of each window
  - e) The location of the street and/or alley
4. **Include a drawing or description with Permit application indicating**
  - a) Type of foundation
  - b) Wall construction detail including stud size, exterior sheathing type and thickness, type of cladding.
  - c) Roof construction detail including type of roof structure, sheathing type and thickness, type of roofing material.
  - d) Addressing items of note in this information sheet.
5. **AB First Call 1-800-242-3447 for a Locate Slip from Gas Company.**



Town of Strathmore  
680 Westchester Road  
Strathmore, AB T1P 1J1

## **Fire Safety Plan**

THIS PLAN MUST BE POSTED ONSITE AND OCCUPANTS/EMPLOYEES ARE EXPECTED TO BE TRAINED  
IN HOW TO FOLLOW ITS PROVISIONS

Building Permit # \_\_\_\_\_ Address: \_\_\_\_\_

Description of Project: **Detached Garage or Shed**

Contact Personnel: \_\_\_\_\_ Phone #: \_\_\_\_\_

### **Specific Considerations:**

- Fire extinguisher(s) or garden hose (or similar extinguishing device) will be available at all times during the progress of the construction
- Access to fire hydrants and buildings for fire apparatus must be maintained

**Emergency Response Numbers: FIRE/POLICE/AMBULANCE: 9-1-1**

### **General Considerations:**

- A WARNING SYSTEM will be in place to warn of potential threats, and facilitate evacuation (yelling, ringing of a bell or horn, etc.)
- EVACUATE to a safe location outside the yard if you are warned of a fire
- PROCEED to the sidewalk/street in front of the house and report to the Fire Department
- FIGHT the fire ONLY if it is small and you are NOT ALONE

### **Hazards Control:**

- At the end of each day combustible refuse will be cleared from the site area and disposed of in bins or stored in neat piles. Unused construction material will be kept neat and orderly.
- No open-flame devices will be used unless a dedicated watch is in place

This Fire Safety Plan is designed in conformance with and is a requirement of Division B, Section 2.8.2 of the Alberta Fire Code, and on signature, becomes an agreement between the building owner/contractor and the Town of Strathmore Fire department.

Building Owner/Contractor Name: \_\_\_\_\_  
Print name

Building Owner/Contractor Signature: \_\_\_\_\_  
Signature

Date: \_\_\_\_\_



Town of Strathmore  
Permit Number

**TOWN OF STRATHMORE  
ELECTRICAL PERMIT APPLICATION**

Date of Application: _____	Estimated Start Date: _____
Development Permit Number: _____	Est. Completion Date: _____
Owners Name: _____	Phone Number: _____
Mailing Address: _____	Fax Number: _____
City/Town: _____	Prov. _____ Postal Code: _____
Email: _____ <i>(please print clearly)</i>	
Contractor Name: _____	Phone Number: _____
Mailing Address: _____	Fax Number: _____
City/Town _____	Prov. _____ Postal Code: _____
Master Certification #: _____	Master Electrician's Signature: _____
Email: _____ <i>(please print clearly)</i>	
Municipality: Town of Strathmore	Civic Address: _____
Lot: _____ Block: _____ Plan: _____	
Part of: _____ ¼ SEC _____ TWP _____ RG _____ W _____ Mer	
Brief Directions: _____	
Project Information: <i>please be sure to check one of each</i>	
Type of Work: <input type="checkbox"/> New Work <input type="checkbox"/> Renovation <input type="checkbox"/> Connection <input type="checkbox"/> Alteration <input type="checkbox"/> Other (Specify) _____	
Intended Use: <input type="checkbox"/> Institutional <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Basement Development <input type="checkbox"/> Garage or Accessory Building (shed) <input type="checkbox"/> Other (Specify) _____	
Supply Service Required: <input type="checkbox"/> Yes <input type="checkbox"/> No Service: Amperes: _____ Voltage: _____ Phase: _____	
Type of Supply Service: <input type="checkbox"/> Overhead <input type="checkbox"/> Underground <input type="checkbox"/> Temporary <input type="checkbox"/> Pad Transformer	
Value: (labour & materials): _____ Total Development Area: _____ ft <sup>2</sup> /m <sup>2</sup>	
Description of Work: _____	
*The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations and shall be commenced within 90 days. The Permit will expire in 1 year unless otherwise noted.. Owner's signature/declaration (homeowner permits only) "I hereby declare I am the owner of the premises in which the work will be conducted and reside on the property. I am doing the work myself and assume responsibility for compliance with the applicable Acts and Regulations." **The Permit Applicant acknowledges that No Refunds will be issued after Permit Issuance of the Plan Review process has been initiated. ***The Permit Applicant acknowledges that No Refunds will be issued for Permit Applications that have been pending in excess of 90 days due to lack of information or payment.	
Applicant Name: _____	Applicant's Signature: _____
Mailing Address: _____	Phone Number: _____
_____ Postal Code: _____	Fax Number: _____
Permit Fee: _____	Other Fee: _____ SCC Levy: _____ Total Fee: _____
Payment Method: <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Debit <input type="checkbox"/> Visa <input type="checkbox"/> Master Card	
<b>Permit Validation Section (to be completed by Permit Issuer)</b>	
Date of Issue: _____	<b>Credit Card Payment Section <i>(please print clearly)</i></b>
<b>Issuing Officer's Information:</b>	Name of Card Holder: _____
Name: _____	Card Number: _____
Designation No. : _____	Expiry Date: _____
Signature: _____	<i>(credit card info will be deleted before forwarding this form outside of this office)</i>

This information is being collected under the Safety Codes Act and Municipal Government Act and will only be used for the purpose of permit applications. It is protected by the Freedom of Information and Protection of Privacy Act. Any questions can be directed towards the municipal FOIP Coordinator.



Town of Strathmore  
Permit Number

**TOWN OF STRATHMORE  
GAS PERMIT APPLICATION**

Date of Application: \_\_\_\_\_ Estimated Start Date: \_\_\_\_\_  
 Development Permit Number: \_\_\_\_\_ Est. Completion Date: \_\_\_\_\_

Owners Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
 City/Town: \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Email: \_\_\_\_\_ *(please print clearly)*

Contractor Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
 City/Town \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Journeyman Class & Number: \_\_\_\_\_  
 Email: \_\_\_\_\_ *(please print clearly)*

Municipality: Town of Strathmore Civic Address: \_\_\_\_\_  
 Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_  
 Part of: \_\_\_\_\_ ¼ SEC \_\_\_\_\_ TWP \_\_\_\_\_ RG \_\_\_\_\_ W \_\_\_\_\_ Mer  
 Brief Directions: \_\_\_\_\_

Project Information: *please be sure to check one of each*  
 Type of Work:  New Work  Renovation  Connection  Alteration  Other (Specify) \_\_\_\_\_  
 Intended Use:  Institutional  Industrial  Commercial  Residential  Basement Development  
 Garage or Accessory Building (shed)  Other (Specify) \_\_\_\_\_  
 Resource Used:  Natural Gas  Propane Other (Specify): \_\_\_\_\_  
 Gas: *(Please mark number outlets)*  
 Furnaces: \_\_\_\_\_ Unit Heaters: \_\_\_\_\_ Barbeques: \_\_\_\_\_ Roof Top Units: \_\_\_\_\_  
 Water Heaters: \_\_\_\_\_ Boilers: \_\_\_\_\_ Space Heaters: \_\_\_\_\_ Tank Sets: \_\_\_\_\_  
 Fireplaces: \_\_\_\_\_ Dryers: \_\_\_\_\_ Other Outlets: \_\_\_\_\_ Specify: \_\_\_\_\_  
 Total Number of Outlets: \_\_\_\_\_ Commercial BTU's \_\_\_\_\_

\*The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations and shall be commenced within 90 days. The Permit will expire in 1 year unless otherwise noted.. Owner's signature/declaration (homeowner permits only) "I hereby declare I am the owner of the premises in which the work will be conducted and reside on the property. I am doing the work myself and assume responsibility for compliance with the applicable Acts and Regulations."  
 \*\*The Permit Applicant acknowledges that No Refunds will be issued after Permit Issuance of the Plan Review process has been initiated.  
 \*\*\*The Permit Applicant acknowledges that No Refunds will be issued for Permit Applications that have been pending in excess of 90 days due to lack of information or payment.

Applicant Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 \_\_\_\_\_ Postal Code: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Permit Fee: \_\_\_\_\_ Other Fee: \_\_\_\_\_ SCC Levy: \_\_\_\_\_ Total Fee: \_\_\_\_\_  
 Payment Method:  Cash  Cheque  Debit  Visa  Master Card

**Permit Validation Section (to be completed by Permit Issuer)**

Date of Issue: \_\_\_\_\_ **Credit Card Payment Section *(please print clearly)***  
**Issuing Officer's Information:** Name of Card Holder: \_\_\_\_\_  
 Name: \_\_\_\_\_ Card Number: \_\_\_\_\_  
 Designation No. : \_\_\_\_\_ Expiry Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_ *(credit card info will be deleted before forwarding this form outside of this office)*



# TIMING FOR BUILDING INSPECTIONS



Please call Audrey or Cathy at (403) 934-3133, or email: [developmen@strathmore.ca](mailto:developmen@strathmore.ca) to arrange an inspection for each of the stages listed below. You may call 24 hours a day, 7 days a week, if no one is available to take your call, your message will be forwarded. **THE INSPECTION MUST BE ARRANGED 2 - 3 WORKING DAYS IN ADVANCE.** A Building Permit is valid for one year from the date of issuance.

If your project is not completed within the one year time limit, an extension must be applied for in writing to the Development Officer.

## D E T A C H E D G A R A G E S

### FOUNDATION / FINAL / OCCUPANCY INSPECTION

**Call when the following are complete, (only one inspection required):**

Slab on grade is complete;  
Shingles, exterior finish (siding or stucco, fascia and soffits);  
Doors and windows are installed and completed.

**Please note \*** Separate permits and inspections are required for plumbing, gas, and electric.

## S H E D S

### FOUNDATION / FINAL / OCCUPANCY INSPECTION

**Call when the following are complete, (only one inspection required):**

Slab on grade is complete, (if applicable);  
Shingles, exterior finish (siding or stucco);  
Doors and windows are installed and completed.

**Please note \*** Separate permits and inspections are required for plumbing, gas, and electric.

## D E C K S

**Call when the following are complete, (only one inspection required):**

Foundation complete  
Guards/handrails and stairs installed