



Township of Asphodel-Norwood

2357 County Road 45, P.O. Box 29

Norwood, Ontario

KOL 2V0

Phone: (705) 639-5343 Fax: (705) 639-1880

APPLICATION FOR RESIDENTIAL BUILDING PERMIT – SCHEDULE 3A

Street Address: _____ **Roll #** 15-01-_____

Lot Size: Frontage _____ Depth _____ Acres _____

Size of Building/Addition: Length _____ Width _____ No. of Storeys _____

Foundation Type: _____ Thickness _____ Footing size _____

Floor Joists: 1st _____ 2nd _____

Insulation: Foundation _____ Walls _____ Ceiling _____

Wall Construction: _____ **Roof Construction:** _____

Wall Finish: Interior _____ Exterior _____

Roof Finish: _____ **Roof Pitch:** _____

General Contractor: _____ **Start Date:** _____

Heating System: _____ **Contractor:** _____

Chimney: No _____ Yes _____ **Fireplace:** No _____ Yes _____ **Fuel Type** _____

Plumbing: 2pc _____ 3pc _____ 4pc _____ **Contractor:** _____

Engineer if Applicable: _____

Remarks: _____

Date: _____ **Owner/Agent:** _____

Phone #: _____