



Medicine Hat  
The Gas City

## Planning & Development Services

580 First Street SE  
Medicine Hat, Alberta T1A 8E6  
Fax: 403.502.8038  
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### COMMERCIAL BUILDING PERMIT APPLICATION

GENERAL INFORMATION (to be completed by the applicant, please print)

<b>Applicants Name:</b>		<input type="checkbox"/> Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Consultant <input type="checkbox"/> Other _____	
Address:		Postal Code:	
Phone:	Fax:	E-mail:	
Cell Phone:	Text: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Applicants Signature			
_____		_____	
Signature		Date	

If applicant is not the property owner, an owner consent form is required Included with application:  Yes  No

<b>Project Name:</b>		
Project Municipal Address:		
Lot:	Block:	Plan:
<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Interior Renovation <input type="checkbox"/> Exterior Renovation <input type="checkbox"/> Tenant Improvement <input type="checkbox"/> Free Standing Sign		
<b>USE</b>	<b>AREA</b>	<b>BUILDING FEATURES</b>
Existing Use:	Area of Construction:	Number of Building Storeys:
Proposed use:	Area of new additions:	Number of Streets Building Faces:
Building Classification (below)	Total Building Area Footprint:	Part 9 <input type="checkbox"/> < 600m <sup>2</sup> /Part 3 <input type="checkbox"/> > 600m <sup>2</sup> [or * below]
<input type="checkbox"/> A1 – Theaters, television studio* <input type="checkbox"/> A2 – Daycare, restaurant, church* <input type="checkbox"/> A3 – Arenas, rinks, swimming polls* <input type="checkbox"/> B1 – Detention facilities, jails*	<input type="checkbox"/> B2 – Care facilities, hospitals* <input type="checkbox"/> B3 – Care facilities, group homes* <input type="checkbox"/> C – Residential, apartments, hotels <input type="checkbox"/> D – Office buildings, Dr. / Chiro, salons	<input type="checkbox"/> E – Stores, supermarkets, shops <input type="checkbox"/> F1 – Mills, grain elevators, plants* <input type="checkbox"/> F2 – Storage buildings, hangers <input type="checkbox"/> F3 – Warehouse, workshops
Building is fully sprinklered	<input type="checkbox"/> Yes <input type="checkbox"/> No	Sprinklers will be altered <input type="checkbox"/> Yes <input type="checkbox"/> No
Building is equipped with a fire alarm	<input type="checkbox"/> Yes <input type="checkbox"/> No	Fire Alarm will be altered <input type="checkbox"/> Yes <input type="checkbox"/> No
Standpipe and hose system	<input type="checkbox"/> Yes <input type="checkbox"/> No	Building has fire walls <input type="checkbox"/> Yes <input type="checkbox"/> No
Restaurant Seating Capacity (if applicable): [     ]	Number of new dwelling units (if applicable): [     ]	

**Construction Value: \$**

CONTACT INFORMATION (fill in where different than applicant above)

<b>Owners <input type="checkbox"/> Lessee <input type="checkbox"/> Tenant <input type="checkbox"/> Name:</b>	
Address:	Postal Code:
Phone:	Fax:
Cell Phone:	Text: <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Contractor</b> or Company Name:	Not awarded in tender <input type="checkbox"/>
Contractor Applicant Name:	
Contractor Address:	Postal Code:
Phone:	Fax:
Cell Phone:	Text: <input type="checkbox"/> Yes <input type="checkbox"/> No
Expected Start Date:	
Additional Information:	



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REQUIRED DOCUMENTS OR DRAWINGS (see appropriate commercial check lists for complete details)	New or Addition	Interior Alteration
<ul style="list-style-type: none"> <li>▪ <b>SITE PLAN:</b> Location and dimensions of all buildings on the site, including dimensions to the nearest property line from an enclosed balcony. Limiting distance from each building face unless included in Code Review</li> </ul>	✓	Required if windows are being added or altered
<ul style="list-style-type: none"> <li>▪ <b>ARCHITECTURAL AND/OR STRUCTURAL DRAWINGS:</b> Floor Plan, Details of new and existing walls, floors, energy code, washrooms and door schedules (indicating fire ratings, size, hardware, etc.)</li> </ul>	✓	✓
<ul style="list-style-type: none"> <li>▪ <b>KEY PLAN:</b> Showing the exact location of tenant space within the building, including tenant unit number, floor space and adjacent tenants</li> </ul>		✓
<ul style="list-style-type: none"> <li>▪ <b>MECHANICAL DRAWINGS:</b> HVAC plans and/or equipment lists (including kitchen layout if applicable) and energy code</li> </ul>	✓	✓
<ul style="list-style-type: none"> <li>▪ <b>ELECTRICAL DRAWINGS:</b> Exit lights, emergency power and fire alarm system and energy code lighting</li> </ul>	✓	✓
<ul style="list-style-type: none"> <li>▪ <b>PLUMBING DRAWINGS:</b> Plumbing lines, energy code requirements</li> </ul>	✓	✓
<ul style="list-style-type: none"> <li>▪ <b>SOILS REPORT:</b> Required when ground has been previously disturbed or when Geo-technical reports requires</li> </ul>	✓	
<ul style="list-style-type: none"> <li>▪ <b>NECB SUMMARY SHEET:</b> Required for new building and additions (includes increase of floor space such as new floors and mezzanines) &gt; 3 storeys in building height; &gt; 300m<sup>2</sup>; All - (A-Assembly, B-Care, treatment detention F1- high hazard industrial) same requirements as Part 3 ABC: See 9.36.1.3 for using 9:36 ABC</li> </ul>	✓ and/or adding floor space	If NECB Compliant building
<ul style="list-style-type: none"> <li>▪ <b>NECB:</b> Require a complete energy codes submission: If prescriptive: drawings must show compliance to all parts 3,4,5,6,7. Trade-off drawings to show prescriptive compliance and provide calculations. IF modeling provide model documentation showing drawings provided exceed the energy use of a reference building.</li> </ul>	✓	If NECB Compliant building
<ul style="list-style-type: none"> <li>▪ <b>PROFESSIONAL SCHEDULES:</b> Required for buildings &gt; 3 storeys in building height; (A2, B1 B2) 1-storey &gt;300<sup>2</sup>; 2-storey &gt;150m<sup>2</sup>; 3-storey &gt;100m<sup>2</sup>; (Residential "C") &gt; 4 dwelling units; if 1 storeys &gt;400m<sup>2</sup>; 2-storey &gt;200m<sup>2</sup>; 3-storey &gt;130m<sup>2</sup>; (D E F) 1-storey &gt;300<sup>2</sup>; 2-storey &gt;150m<sup>2</sup>; 3-storey &gt;100m<sup>2</sup></li> </ul>	✓	See required Professional Schedules
<ul style="list-style-type: none"> <li>▪ <b>ADDITIONAL PERMITS (when required):</b> Development, Demolition, Building, Mechanical, Plumbing, Electrical, Sprinklers, Backflow preventers; Alberta Health Services</li> </ul>	✓	
<ul style="list-style-type: none"> <li>▪ <b>NEW HOME WARRANTY:</b> Proof of registration on all new dwelling units is required prior to issuance of permit</li> </ul>	✓	✓
<ul style="list-style-type: none"> <li>▪ <b>ALTERNATIVE SOLUTIONS:</b> Where a design differs from the Acceptable Solutions in Division B of the ABC a request for an Alternative Solution can be applied for on an Alternative Solutions Form. This must include all reference to the Functions and Objective statements for the acceptable solution in Division B of the ABC</li> </ul>	✓	✓

**Compliance with this code shall be achieved by complying with the applicable solutions in Division B** or using alternative solutions that will achieve at least the minimum level of performance required by Division B in the areas defined by the objections and functional statements attributed to the applicable solutions (see Alternative Solutions above)

**No work shall commence prior to the issuance of a Building Permit.** Double fees apply to all work that has been started or completed prior to permit issuance. Permits may also be required for Electrical and Mechanical work. Inspections are required at certain stages of construction so that the Safety Codes Officers can verify compliance with the Alberta Building Code. Please review the required inspections noted on the Plan Check letter issued with your Building Permit.

**The personal information on this form is being collected for the purpose of this Permit Application under the authority of the Freedom of Information and Protection of Privacy (FOIP) Act, and is protected by the Act. If you have any questions about the information being collected, contact the City of Medicine Hat FOIP Head 403-529-8234.**