



ALTERATION TO PROPERTY APPLICATION

PERMIT # (Assigned by the Town following approval)

The permit holder will comply with and are bound by the provisions of By-Law # 6080-94 and By-Law #5783-91 of the Corporation of the Town of Smiths Falls, and amendments thereto. Work shall commence within ninety (90) days of permit issuance. Should the ninety (90) day period lapse with works not having commenced, nor an extension requested by the permit holder and approved by the Town, the permit will expire. Work is not to commence prior to the issuance of an approved permit.

PERMIT HOLDER: Owner [] Contractor [] ESTIMATED COMPLETION DATE:

PROPERTY OWNER (please use mailing address)

Name:
Address:
Telephone: Email:

CONTRACTOR INFORMATION (please use mailing address)

Company Name:
Contractor Representative Name:
Address:
Telephone: Email:

PROJECT SITE INFORMATION Municipal Property [] Private Property []

Address:
Proposed Work to be Completed:

PROJECT INFORMATION

- Sidewalk and/or Curb Alteration
Walkway Installation or Alteration
Road Cut
Other (please specify):
Driveway Installation or Alteration
Retaining Wall
Landscaping

REASON FOR ALTERATION

- Existing sidewalk/curb in poor condition
Repair due to service installation
Damage due to activity
Other (please specify):
New driveway or entrance
Driveway being modified

INFORMATION TO APPLICANTS

The permit holder assumes all responsibility for the protection of the public during the works. Excavation(s) shall be properly secured and signed appropriately. If at any point during the works, the Town is of the opinion that works are taking place in an unsafe manner, the Town will issue a stop work order. Works will be permitted to commence following all safety concerns being addressed.

Design Submission

A 1:200 scaled drawing illustrating the works shall accompany the permit application. The drawing shall identify the location of removals (if applicable), the location of reinstatement (if applicable), location of works and materials to be used. The Town at its sole discretion, based on the proposed nature of works, may ask for further information pertaining to the works, or, that a qualified person (ex. P. Eng, Landscape Architect, etc.) be engaged to provide a comprehensive design for the works.

Underground Locations

It is the permit holder's responsibility to ensure all underground utilities are located prior to the commencement of works. Locates are to be requested by the permit holder through Ontario One Call. Note: There is a "7 Working Day" turnaround for all On1call locate requests.

Telephone: 1-800-400-2255 or www.on1call.com for locate requests.

Traffic Control

If works are to take place within the roadway, or affect pedestrian access of municipal sidewalks, the permit holder will be required to submit a Traffic Control Plan and/or a Pedestrian Control Plan in accordance with Ontario Traffic Manual (OTM) Book 7.

Inspections

It is the permit holder's responsibility to call for the appropriate inspections. Please contact the Public Works & Utilities Department at 613-283-4124 ext. 3302 to request an inspection. Please provide forty-eight (48) hours notice. Inspection requests received with less than forty-eight (48) hours notice will not be guaranteed. Inspections will be scheduled weekdays between 8:00 a.m. and 3:00 p.m.

The following inspection applies:

- 1) Prior to concrete, precast landscape pavers, or hot mix asphalt placement.

Reinstatement

Reinstatement without adequate inspection at required stages of the project may require the permit holder to excavate the work. The permit holder will assume the responsibility for all works before acceptance by the Town. All construction shall conform to the Town of Smiths Falls Engineering Design and Specification Manual. For structural reasons, the minimum length of concrete sidewalk and/or concrete curb replacement shall be 4.5 metres.

The permit holder agrees that, if circumstances dictate that the reinstatement of roadway, concrete curb, concrete sidewalk, and/or boulevard must be delayed; the permit holder shall be responsible to maintain the subject work area in a condition acceptable to the Director of Public Works & Utilities (or designate) until such time as the reinstatement is complete. Roadway and sidewalk areas must be maintained with a temporary surface of cold mix asphalt patch until such time as final reinstatement is completed. This shall be at the permit holder's expense.

Indemnification

I/We hereby indemnify and save harmless the Corporation of the Town of Smiths Falls, its servants, workmen, contractors, and agents from all loss, damage, damages, law suits, costs, and expenses of every nature and kind arising from or in consequence of the issuance of the permit or permits and any work done thereunder whether such loss, damage, damages, costs, and expenses arise by reason of negligence or without negligence on my/our part or of my/our employees, servants, workmen, contractors, or agents and whether such loss, damage, damages, costs, and expenses are occasioned to the Corporation of the Town of Smiths Falls or to any other person or Corporation whatsoever.

Insurance

A Certificate of Insurance for all Contractors performing work under this permit must be provided. Coverage must include five million dollars Commercial General Liability naming "The Corporation of the Town of Smiths Falls" as an additional insured. The policies shall not be cancelled, permitted to lapse or materially changed unless the Insurer notifies the Corporation of the Town of Smiths Falls in writing at least thirty (30) days prior to the effective date of the cancellation, lapse or material change.

FEES

Permit Fee	\$25.00
Inspection Fee	\$75.00
Total Fee	\$100.00

Signature of Applicant: _____ Date: _____

FOR OFFICE USE ONLY	
Application Reviewed By: _____	Date: _____ Approved: Yes <input type="checkbox"/> No <input type="checkbox"/>
Zoning review completed by Planning (if applicable): Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
.....	
Payment Received: _____	Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Invoice <input type="checkbox"/> # _____
Comments: _____	
.....	
Date of Inspection Request: _____	
Inspectors Name: _____	Date: _____ Approved: Yes <input type="checkbox"/> No <input type="checkbox"/>