



**CORPORATION OF THE CITY OF PEMBROKE
BUILDING DEPARTMENT**

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BUILDING INFORMATION MATRIX

Please be advised that the following information is required when applying for a Building Permit. This form is considered part of a Code review necessary to ensure compliance with the Ontario Building Code. Should you have any additional comments, please feel free to include them in Section (D) below.

OWNER: _____

ADDRESS: _____

ARCHITECT: _____ **PHONE:** _____ **FAX:** _____

ENGINEER: _____ **PHONE:** _____ **FAX:** _____

BCIN NO.: _____ **OR LICENSE NO.:** _____

PROJECT: _____

PROJECT ADDRESS: _____

(A) MAJOR OCCUPANCY _____

OTHER OCCUPANCIES _____

BUILDING AREA _____

NUMBER OF STOREYS _____

BUILDING HEIGHT _____

NUMBER OF STREETS FACING _____

(B) BUILDING CLASSIFICATION SECTION 3.2.2. _____ OF ONTARIO BUILDING CODE

CONSTRUCTION TYPE: _____ COMBUSTIBLE: _____ NON-COMBUSTIBLE: _____

FLOOR ASSEMBLY: _____

ROOF ASSEMBLY: _____

LOAD BEARINGS: _____

OCCUPANT LOAD: _____

(C) FIRE WALLS: _____ FIRE RESISTANCE RATING: _____

SPRINKLER SYSTEM: _____ REQUIRED: _____ NOT REQUIRED: _____

STANDPIPES SYSTEM: _____ REQUIRED: _____ NOT REQUIRED: _____

ALARM SYSTEM: _____ REQUIRED: _____ NOT REQUIRED: _____

MEZZANINE AREA: _____ PERCENTAGE: _____ ENCLOSED: _____

ADEQUATE WATER SUPPLY/FIRE FIGHTING: _____

(D) COMMENTS: _____

