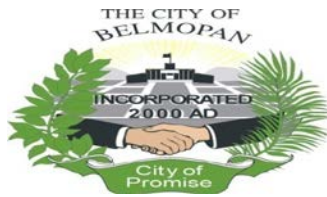




36/38 TRINITY BOULEVARD
 CITY OF BELMOPAN
 PHONE: 501-822-2271/
 501-822-2319
 FAX: 501-822-3992
 E-mail: bmplba@btl.net



APPLICATION TO REVIEW

REF: _____/BMPLBA/_____

I/We hereby apply for permission to ***Erect/Alter/Add/Demolition*** in accordance with the following information and as shown on the accompanying drawings:

1. Legal description (street address or similar description that will readily identify and definitely locate the proposed building: **Parcel No:****Block No:**.....

Address:.....

(House No. & Street)

.....

(Town, Village, District)

2. **Legal Owner of Property:**.....

.....

3. **Project Owner:**

Registered address:

Telephone/Cellphone: **Facsimile:**

E-mail:.....

4. **Parcel Measurement: Front:** **Right Side:**.....

Back:.....**Left Side:**.....

Total Area:..... Acres Sq. Ft Sq. M. Sq. Yd.

5. **Zoning: Building use:** Residential Commercial Industrial Institutional Amenities Gov't

a) **Number of individual/separate buildings:**

b) **Number of individual/separate units within each building:**

c) **Estimated number of occupants:** (this will be reflected on Occupancy Certificate)

Resident:..... Staff:.....Patrons:.....Visitors:.....Total Occupant Loading:.....

e) **Primary use of neighboring buildings/lots/Parcel:**

Residential Commercial Industrial Amenities Gov't

6. **Total percentage of property (lot/Parcel) covered:**

a) The following number of parking spaces are provided within property boundaries

(To Be Indicated on Drawings also): **Resident:..... Staff:..... Patrons:..... Visitors:.....**

Total Occupant Loading:.....

b) **Setbacks: Front:** **Right Side:**.....

Back:..... **Left Side:**.....

7. **Building Description**

i. **Dimension of Building (s):**.....

ii. **Number of Floors:**.....

iii. **Maximum Height of Building (s):**

8. **Building Construction type (Construction materials):**

i. **Foundation:** RC Piles RC Pads Timber Piles RC Strip Foundation

ii. **Structural Framework:** Metal Reinforced Concrete Steel Frame Timber

iii. **Exterior Walls & Openings:** Concrete Blocks Reinforced Concrete Timber Metal

iv. **Floors:** Reinforced Concrete Timber

v. **Stairways:** Reinforced Concrete Timber

vi. **Roofs:** Concrete Timber w/Corrugated Roofing Metal w/Corrugated Roofing Thatch

9. **Proposed use of the building:**

i. **Foundation or below grade level:** Residential Commercial Industrial Institutional
Amenities Gov't

ii. **Ground Floor:** Residential Commercial Industrial Institutional Amenities Gov't

iii. **First Floor:** Residential Commercial Industrial Institutional Amenities Gov't

iv. **Second Floor:** Residential Commercial Industrial Institutional Amenities Gov't

v. **Additional Floors:** Residential Commercial Industrial Institutional Amenities Gov't

vi. **Roofs:** Residential Commercial Industrial Institutional Amenities Gov't

10. Value (**Not Cost**) of works on any new building or structure or any addition, remodeling or alteration to an existing building (include materials, labour, plant, overhead, etc.):.....

11. Change in the use of land and/or existing building (s). (**Complete only where there is a proposed change of use other than new construction.**)

i. **Current use of Land:** Residential Commercial Industrial Institutional Amenities Gov't

ii. **Proposed use of Land:** Residential Commercial Industrial Institutional Amenities
Gov't

iii. **Current use of Building:** Residential Commercial Industrial Institutional Amenities
Gov't

iv. **Proposed use of Building:** Residential Commercial Industrial Institutional Amenities
Gov't

12. The sanitary fittings will consist of the following number of:

Wash Hand Basins:.....**Bathtubs:**..... **Urinals:****Kitchen Sinks:**.....

Hot tubs or spas:.....**Utility Sinks:**.....

13. **The water supply will be by:** BWS Cistern Water tank Well Public Water Reservoir

14. **The daily water consumption is estimated to be:**.....Gals.

15. **The sewage disposal by:** Septic Sewer Waste Water Treatment Type:.....

16. **Method of storm water discharge/disposal** Drain Run Off Leachfield Water Reservoir

17. **Method of waste water discharge/disposal** Leachfield Sewer Soakaway

Waste Water Treatment Type

18. **Method of solid waste (garbage) storage & disposal** Municipal Village Private N/A

19. **The Electrical Load Demand is Estimated to be:**kVA

20. **Electrical Supply will be provided by:** BEL Generator Solar Panel

21. **Back-up electricity supply will be provided by:** BEL Generator Solar Panel N/A

22. **The Air Conditioning Load Demand is Estimated to be:**.....

23. The building will/will not be fitted with the following type and quantity of air conditioning fixtures.

- i. Central air conditioning:
- ii. Split units:.....
- iii. Window units:

24. Technicians, Architects and /or Engineers of Record:

I, the undersigned accept full responsibility for the correctness of the Technical Information submitted on this Application Form, I also accept full responsibility for the correctness and suitability of the information provided in the other documents submitted along with this Application Form.

1. Name of **Technician** (Print Name).....

i. Address:

ii. Contact:.....

iii. Signature:Date:.....

2. Name of **Architect** (Print Name).....

i. Address:

ii. Contact:.....

iii. Signature:Date:.....

3. Name of **Engineer** (Print Name)

i. Address:

ii. Contact:.....

iii. Signature:Date:.....

25. I _____ accept responsibility for applying to the Belmopan Local

Building Authority for the following inspections/permits:

Permits/Extension	Building less than 1,000 sq. ft. and not more than 1 storey	Buildings 1,000 - 3,000 sq. ft. and up to 2 storey	Buildings over 3,000 sq. ft. and over 2 storey
1. Notice of intention to commence building works;	X	X	X
2. Inspection a: Setting out;	X	X	X
3. Inspection b: Foundation, excavation and foundation placing;			
4. Inspection c: Floor slab(s);			
5. Inspection d: Plumbing & electrical rough- in;			
6. Inspection e: Walls, columns & beams;			
7. Inspection f: Roof Structure;			
8. Fire Safety Inspection;			X
9. Public Health Inspection;			X
10. Application for permit to occupy and use a building	X	X	X

The Professional of Record to review and sign the Application Form.

I certify that this application has the consent of the Owner of the property:

a. Name of Permittee or his authorized agent.....

Address of Permittee or his authorized agent.....

Phone Number:..... Email:.....

b. Signature of Permittee or his authorized agent.....

Date Submitted :.....