

# COMPLEX BUILDINGS

## REQUIRED DOCUMENTATION FOR FINAL INSPECTION

Please use this list as a Table of Contents at the front of your package of submission documents.

Address: \_\_\_\_\_ Building permit: \_\_\_\_\_

*Provided*   *Not applicable*

**TAB 1**         **CONFIRMATION OF REQUIRED DOCUMENTATION LIST**

**TAB 2**         **DIRECTORY OF PRINCIPALS** (include role, firm, name, telephone, email)

- |                          |                          |                                       |
|--------------------------|--------------------------|---------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Owner                                 |
| <input type="checkbox"/> | <input type="checkbox"/> | Co-ordinating Registered Professional |
| <input type="checkbox"/> | <input type="checkbox"/> | Registered Professionals              |
| <input type="checkbox"/> | <input type="checkbox"/> | Warranty Provider                     |
| <input type="checkbox"/> | <input type="checkbox"/> | General and Sub Contractors           |

**TAB 3**         **LETTERS OF ASSURANCE** (A, B, CA, CB)

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Co-ordinating Registered Professional (CRP) |
| <input type="checkbox"/> | <input type="checkbox"/> | Architectural                               |
| <input type="checkbox"/> | <input type="checkbox"/> | Structural                                  |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical                                  |
| <input type="checkbox"/> | <input type="checkbox"/> | Plumbing                                    |
| <input type="checkbox"/> | <input type="checkbox"/> | Fire Suppression Systems                    |
| <input type="checkbox"/> | <input type="checkbox"/> | Electrical                                  |
| <input type="checkbox"/> | <input type="checkbox"/> | Geotechnical Temporary                      |
| <input type="checkbox"/> | <input type="checkbox"/> | Geotechnical Permanent                      |
| <input type="checkbox"/> | <input type="checkbox"/> | Other _____                                 |

**TAB 4**         **PROFESSIONAL REVIEW LETTERS AND DOCUMENTS**

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Code Consultant - Alternative Solution Letter of Professional Certification Compliance                          |
| <input type="checkbox"/> | <input type="checkbox"/> | Code Consultant - Life Safety Demonstration Protocol for final building inspection                              |
| <input type="checkbox"/> | <input type="checkbox"/> | CRP Confirmation of Development Permit Requirements (directly reference and comment on each DP condition)       |
| <input type="checkbox"/> | <input type="checkbox"/> | Final Registered Strata Plan including Civic Address  |
| <input type="checkbox"/> | <input type="checkbox"/> | Final Survey (Sealed and Signed) (including siting and height of all buildings/structures and grade elevations) |
| <input type="checkbox"/> | <input type="checkbox"/> | Site Services – Civil Engineer  |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Envelope Consultant  |
| <input type="checkbox"/> | <input type="checkbox"/> | Roofing Consultant  |
| <input type="checkbox"/> | <input type="checkbox"/> | Generator Test Report/Certificate   |
| <input type="checkbox"/> | <input type="checkbox"/> | Confirmation of Fire Stop Materials/Systems Used  |
| <input type="checkbox"/> | <input type="checkbox"/> | Other _____   |

# FINAL BUILDING INSPECTION

## NON SINGLE-FAMILY CONFIRMATION OF REQUIRED DOCUMENTATION

Provided Not applicable

### TAB 5

#### FIRE ALARM

- Fire Alarm Verification Certificate (include field work sheets)
- Fire Protective Signaling Certificate confirming alarm monitoring and service companies
- CAN/ULC-S1001 Integrated Testing Plan and Report

### TAB 6

#### SPRINKLER SYSTEM

- Material and Test Certificate – Aboveground Piping
- Material and Test Certificate – Underground Piping

### TAB 7

#### PROVINCIAL APPROVALS

- Certificate to Operate Elevating Device (one per each device)
- Technical Safety BC - Gas Approval
- Technical Safety BC - Electrical Approval
- Vancouver Coastal Health Approval – Pools/Hot Tubs
- Vancouver Coastal Health Approval – Food Services

### TAB 8

#### DISTRICT OF WEST VANCOUVER FINAL INSPECTIONS AND APPROVALS

- Electrical final *Inspection Notice (Accepted)* - (include printed *Inspection Notice* under Tab 8)
- Plumbing final *Inspection Notice (Accepted)* - (include printed *Inspection Notice* under Tab 8)
- Drainage final *Inspection Notice (Accepted)* - (include printed *Inspection Notice* under Tab 8)
- Fire Sprinklers final *Inspection Notice (Accepted)* - (include printed *Inspection Notice* under Tab 8)
- Acceptance from Planning Department to conduct Final Building Inspection  
(*email confirmation acceptable*)
- Acceptance of Pre-Incident Plan – Fire Department (email confirmation acceptable)
- Acceptance of Fire Safety Plan – Fire Department (email confirmation acceptable)
- Copy of Permit - Electrical Operating Permit (for service exceeding 250Kva)
- Copy of permit - DWV Sign Permit(s)

Submitted by Co-ordinating Registered Professional:

Signed:

Name (print):

Address (print):

Phone number:

Date:



**Freedom of Information and Protection of Privacy Act Notice for applicants for this street occupancy request:** By submitting this request, you are voluntarily consenting to the collection of your personal information by the District of West Vancouver through the requestor named above. This information is being collected by the District of West Vancouver pursuant to section 26 (c) and (e) of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection of this personal information, please contact the Privacy Officer between 8 a.m. and 4:30 p.m., Monday to Friday excluding statutory holidays, at 604-921-3497 (750 17th Street, West Vancouver BC V7V 3T3).

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