



RESORT VILLAGE OF TOBIN LAKE

PO Box 1479
Nipawin, SK S0E 1E0

306-862-2895
rvtobinlake@sasktel.net
www.resortvillageoftobinlake.ca

BUILDING PERMIT APPLICATION

OWNER	Name	Phone Number ()
	Mailing Address	Email
	City	Province Postal Code

CONTRACTOR	Name	Phone Number ()
	Mailing Address	Email
	City	Province Postal Code

PROPERTY INFORMATION	Lot Block Plan	Civic Address
	Existing Use	
	Proposed Use	

DEVELOPMENT INFORMATION	New Build <input type="checkbox"/>	Alteration <input type="checkbox"/>	Addition <input type="checkbox"/>
	Description of Proposed Use:		
	<hr/>		
	<hr/>		
Start Date: _____ Completion: _____			
Other Comments:			
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Two copies of scaled plans must be submitted which include the following:

- Foundation plan showing footings, piles, tele post pads, foundation walls, interior ground preparation, finishes and elevations
- Floor plans showing interior and exterior walls, doors, windows, stairs and dimensions of framing material and building
- Floor joist and beam plan (for each floor level of building)
- Rafter plan

Estimated cost of construction (excluding site): \$ _____

Please select a Building Official Service
(you must see the project through with your selection)

B & B Enforcement Services ☐
\$1.05/\$1000 Value of Construction
+ \$157.50 per inspection

MUNICODE ☐
\$3.55/\$1000 Value of Construction
(minimum of \$200)

DECLARATION:

I, _____ of the Resort Village of Tobin Lake in the province of Saskatchewan, agree to comply with the Building Bylaw of the Resort Village of Tobin Lake and acknowledge that it is my responsibility to ensure compliance with the Building Bylaw and with any other applicable bylaws, acts, regulations regardless of any plan review or inspections that may or may not be carried out by the local authority or its authorized representative. Further, I understand that once I choose a Building Official I must follow through with my selection to the end of the project.

Date

Signature

OFFICE USE ONLY

Application Number: _____

Date Received: _____

Date sent to Building Inspector: _____

Occupancy Permit: _____