

Gas Permit Application

Building Department: 604-990-2480, building@dnv.org, fax: 604-984-9683

INSPECTIONS:

- Book online at www.dnv.org/inspection
- If you submit your inspection request by 2:30pm Monday-Friday (excluding statutory holidays), you can schedule your inspection for the next business day

Location of Work		GAS			
Address					
Occupancy Type	<input type="checkbox"/> Single Family	<input type="checkbox"/> Duplex/Townhouse	<input type="checkbox"/> Commercial	<input type="checkbox"/> Institutional	
	<input type="checkbox"/> Single Family with Secondary Suite	<input type="checkbox"/> Multi-Family Apartment	<input type="checkbox"/> Industrial	<input type="checkbox"/> Government	
Type of Work	<input type="checkbox"/> New Construction	<input type="checkbox"/> Alteration/Addition	<input type="checkbox"/> Replacement/Repair		
Installation Type	<input type="checkbox"/> Appliance Installation	<input type="checkbox"/> Piping Only Length (m) _____.			
Description of Work					
Building Permit Status					
Is this work related to a current Building Permit?		<input type="checkbox"/> Yes		<input type="checkbox"/> No	
If yes, is the Building Permit issued?		<input type="checkbox"/> Yes		Building Permit Number BLDG _____.	
Contractor Information					
Contractor					
Business Licence Number		Gas Contractor Number		LGA _____	
Mailing Address		City		Postal Code	
Email		Phone		Cell	
<p>By signing or clicking the box below, I affirm that the information provided in this application for a gas permit is true and correct and agree to comply with the BC Gas Safety Regulations and the District's Construction Bylaw. I further agree to indemnify and save harmless the District of North Vancouver and its employees against all claims, liabilities, judgements and costs arising from any work done pursuant to this permit.</p>					
Applicant's Signature					
I understand that checking this box constitutes a legal signature <input type="checkbox"/>		Date			
Homeowner Information					
Name					
Email		Phone		Cell	

If you are the Homeowner doing the work, you must:

- Be the registered owner of the property and living in the home
- Provide schematic drawings with the application
- Provide signed Statutory Declaration form with application

Installation Details

Appliance/Fixture Type	Quantity	BTUs or kW	Piping only (m)
Barbeque			
*Boiler			
Compressed Gas Appliance & Storage Tank			
Cooktop			
Dryer			
Fireplace			
*Furnace			
Gas Lantern			
Generator			
Pool Heater			
Range			
Unit Heater			
Water Heater			
Other (Please Specify)			
Other (Please Specify)			

*** Mechanical Requirements for Heating Systems**

For new hydronic or forced air heating installations:

- A heating permit is required

For forced air replacement or alteration installations:

- Forced air retrofit heat loss calculations must be submitted at time of application

Prior to requesting a final inspection, the following must be provided where applicable:

- Test Certificate 'A' – Forced Air Heating Systems
- Test Certificate 'B' – House Piping/Vents

The personal information collected on this form is done so pursuant to the Community Charter and/or the Local Government Act and in accordance with the Freedom of Information and Protection of Privacy Act. The personal information collected herein will be used only for the purpose of processing this application or request and for no other purpose unless its release is authorized by its owner, the information is part of a record series commonly available to the public, or is compelled by a Court or an agent duly authorized under another Act. Further information may be obtained by speaking with The District of North Vancouver's Manager of Administrative Services at 604-990-2207 or at 355 West Queens Road, North Vancouver.