



# Municipality of the County of Colchester

Community Development Department

1 Church Street, Truro, NS B2N 3Z5 Tel: 897-3170 Fax: 843-4061

## INFORMATION REQUIRED FOR ADDITIONS, GARAGES, SHEDS

Name of Owner: \_\_\_\_\_

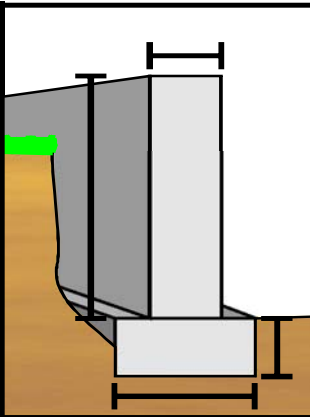
Location of Project: \_\_\_\_\_

Building Type: \_\_\_\_\_ Building Size: \_\_\_\_\_

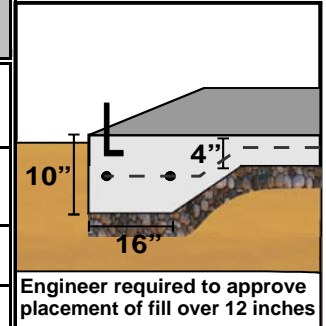
Number of Stories: \_\_\_\_\_ Number of Rooms: \_\_\_\_\_

Foundation Type:

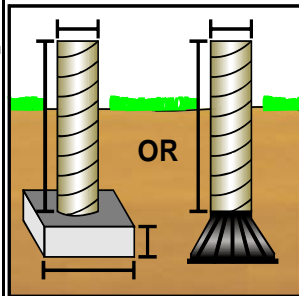
Frost Wall	
Footing Width -	in
Footing Thickness -	in
Thickness of Wall -	in
Height of Wall -	ft



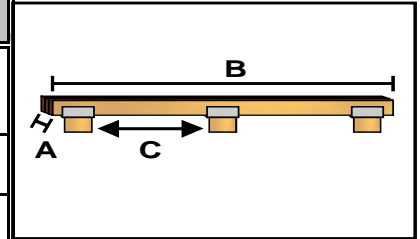
Garage Slab	
Thickness -	in
Slab placed on 12 inches of	
in-filled land? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Engineer letter required <input type="checkbox"/> Yes <input type="checkbox"/> No	



Piers & Footings	
Footing Width -	in
Footing Thickness -	in
Size of Pier -	in
Height of Pier -	ft



Carrying Beam	
A) Beam Size	
B) Span of Beam	
C) Support Spacing	



	Size	Span / Length	Spacing
Main Floor Joists			
Second Floor Joists			
Wall Studding			
Roof Rafters / Prefab Trusses			

Graded Lumber: Yes \_\_\_\_\_ Own Lumber \_\_\_\_\_ (Provide Licensed Grader Form)

Plumbing Required: No \_\_\_\_\_ Yes \_\_\_\_\_ Plumber \_\_\_\_\_

Type of Heating System: \_\_\_\_\_ Flue: Prefab \_\_\_\_\_ Masonry \_\_\_\_\_

Additional Information / Comments:

\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_