



Inspection and Technical Services

508-401 York Avenue
Winnipeg Manitoba Canada R3C 0P8
Phone: (204) 945-3373
Web: <https://www.gov.mb.ca/labour/its/>

this area is for Office Use Only

ITS BC Form - 14 OCCUPANCY PERMIT APPLICATION The Buildings Act

The undersigned hereby applies for a Permit authorizing the occupancy of the following premises, PLEASE PRINT CLEARLY:

TYPE OF PERMIT: <input type="checkbox"/> OCCUPANCY PERMIT <input type="checkbox"/> INTERIM OCCUPANCY PERMIT				INTERIM OCCUPANCY EXPIRY DATE: _____	
NAME OF BUILDING: _____					
LOCATION OF BUILDING: _____					
(Land Description)		(City or Town or Range)		(Municipality)	
PROPOSED DATE OF OCCUPANCY: _____					
BUILDING PERMIT NUMBER: _____					
USE OF BUILDING OR PREMISES:		MAJOR:		OTHER:	
NO. OF STOREYS:		BUILDING AREA:		PROPOSED MAX OCCUPANT LOAD:	
NEW:		ENLARGEMENT:		ALTERATION:	
APPLICANT INFORMATION					
FIRST NAME		MIDDLE INITIAL		SURNAME	
ADDRESS		CITY/TOWN		POSTAL CODE	
MAILING ADDRESS		HOME PHONE		CELL PHONE	
SIGNATURE OF APPLICANT				DATE (YYYY/MM/DD)	

SPACE BELOW IS FOR OFFICE USE ONLY

OCCUPANCY GROUP _____		CONSTRUCTION ARTICLE _____		PERMIT FEE: _____	
Approvals	Required	Received	Approvals	Required	Received
Sprinkler System			Architectural (Parts 3 & 5)		
Fire Safety Plan			Structural (Part 4)		
Fire Alarm			Mechanical (Part 6)		
Plumbing (Part 7 & MPC)			NECB		
Electrical			Other (specify)		

WHEN PROPERLY VALIDATED (in this space) THIS IS YOUR PERMIT

OCCUPANCY/INTERIM OCCUPANCY CONDITIONAL UPON:	
VALIDATED BY: _____ DATE: _____	
OCCUPANCY PERMIT #: - OP	