



**BUILDING ANALYSIS FORM**

**ARCHITECT (OR ENGINEER) to fill out and return to  
BUILDING & BY-LAW SERVICES**

**Site Location:** \_\_\_\_\_ **Application No.** \_\_\_\_\_

**CLASSIFICATION:**

**CODE REFERENCE:**

- |                                       |  |          |                    |
|---------------------------------------|--|----------|--------------------|
| 1. Project Description:               | New ___ ; Addition ___ ; Alteration ___ ; Change Use ___ .               |          | <u>Section No.</u> |
| 2. Major Occupancy:                   | _____  | 3.1.2    | or _____           |
| 3. Building Area m <sup>2</sup> :     | Existing _____ ; New _____ ; Total _____                                 | 1.1.3.2  | or _____           |
| 4. Gross Floor Area m <sup>2</sup> :  | Existing _____ ; New _____ ; Total _____                                 | 1.1.3.2  | or _____           |
| 5. No. of Stories:                    | Above Grade _____ ; Below Grade _____                                    | 1.1.3.2  | or _____           |
| 6. Height of Building m:              | _____  | 1.1.3.2  | or _____           |
|                                       |  | 3.2.2    | or _____           |
| 7. Faces no. of Streets:              | _____  | 1.1.3.2  | or _____           |
|                                       |  | 3.2.2.10 | or _____           |
| 8. Building Classification:           | _____  |          |                    |
| 9. Sprinkler System Proposed:         | Entire Building ___ ; Basement only ___                                  | 3.2.2    | or _____           |
|                                       | In lieu of Roof Rating ___ ; Not required ___                            |          |                    |
| 10. Standpipe required:               | Yes ___ ; No ___ .   | 3.2.9.   | or _____           |
| 11. Fire Alarm required:              | Yes ___ ; No ___ .   | 3.2.4    | or _____           |
| 12. Adequate Water Supply/Service:    | Yes ___ ; No ___ .   | 3.2.5.   | or _____           |
| 13. High Building:                    | Yes ___ ; No ___ ; Measure _____   | 3.2.6.   | or _____           |
| 14. Type of Construction:             | Combustible ___ ; Non-combustible Both                                   | 3.2.2    | or _____           |
| 15. Mezzanine/s Area m <sup>2</sup> : | _____  | 3.2.1.1  | or _____           |
| 16. Total Occupant Load:              | _____ persons  | 3.1.16.  | or _____           |
|                                       | Based on: _____ m <sup>2</sup> per person ___ : Design of Building ___ . |          |                    |
| 17. Barrier-free design:              | Yes ___ ; No ___ .   | 3.8.     | or _____           |
|                                       | If 'No', explain _____   |          |                    |
| 18. Hazardous Substances:             | Yes ___ ; No ___ .   |          |                    |

19.	Required Fire Resistance Rating (FRR.) 3.2.2.	Horizontal Assemblies FRR. (Hours)		Listed Design No. Or Description (SG-2)
		Floors _____ Hours	Roof _____ Hours	
		Mezzanine _____ Hours		
		FRR. of Supporting Members		Listed Design No. Or Description (SG-2)
		Floors _____ Hours	Roof _____ Hours	Mezzanine _____ Hours

20.	Spatial Separation - Construction of Exterior Walls: 3.2.3.										
	Wall	Area of EBF (m <sup>2</sup> )	L. D (m)	L/H or H/L	Permitted Max. % of Openings	Proposed % of Openings	FRR. (Hours)	Listed Design or Description	Comb Constr	Comb Constr Nonc. Cladding	Non-comb Constr
	North										
	South										
	East										
	West										

**Signature (Architect or Engineer)** \_\_\_\_\_  
As set out in OAA Practice Bulletin A.9

**Date** \_\_\_\_\_