



226 Mystery Lake Road
Thompson, MB, R8N 1S6
Chief Building Inspector 677-7906
Building Inspector 677-7953
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LETTER OF ASSURANCE FOR PROFESSIONAL DESIGN AND COMMITMENT FOR INSPECTION

DATE: _____

PERMIT #: _____

Re: Description of Project:

The undersigned hereby gives assurance that, to the best of their knowledge the design of the above mentioned building meets the Codes / Standards below.

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|-------|--|
| _____ | Architectural Design |
| _____ | Part 3 & 5 Manitoba Building Code (MBC) (Incl. MECB: Part 3) |
| _____ | Part 4 MBC |
| _____ | Part 6 MBC (Incl. MECB: Part 5) |
| _____ | Part 7 MBC (Plumbing)(Incl. MECB: Part 6) |
| _____ | Fire Suppression System |
| _____ | Automatic Sprinkler System |
| _____ | Electrical (incl. MECB: Parts 4&7) |
| _____ | Fire Alarm & Detection System |
| _____ | Exhaust & Suppression System |
| _____ | Manitoba Energy Code for Building 2013(MECB) |

Components of the project as shown on the plans and supporting documents prepared by the registered professional conform to all requirements of all applicable Acts, Regulations and By-Laws. Further, the undersigned will be responsible for inspections of the above-referenced components during construction as required by Manitoba Building Code Amendment, article 2.2.7.2(1) – Review of construction.

The undersigned also assured competence in the necessary fields of expertise to undertake the project on the basis of training, ability and expertise in the appropriate professional and technical disciplines.

As used herein, inspections shall mean such reviews of the work at the project site and at fabrication locations, where applicable, as the registered professional, on the basis of professional discretion, considers necessary in order to ascertain that the work conforms in all respects to the plans and supporting documents prepared by this registered professional, for which the Building Permit is issued. This includes keeping records of all site visits and any corrective action taken as a result thereof. Copies of the inspection reports will be provided to the authority having jurisdiction upon request.

Name (print)

Signature

Date

Affix Professional Seal with signature and date