



THE CORPORATION OF THE  
**CITY OF WHITE ROCK**  
15322 BUENA VISTA AVENUE, WHITE ROCK, B.C. V4B 1Y6

DEVELOPMENT SERVICES DEPARTMENT TEL: (604)541-2136 FAX: (604)541-2153

## FORM 'A'

### **OWNERS ACKNOWLEDGEMENT OF RESPONSIBILITY AND UNDERTAKINGS**

RE: Address: \_\_\_\_\_

Building Permit Application No.: \_\_\_\_\_

1. I am the owner of the land and premises located at \_\_\_\_\_ WHITE ROCK BC.
2. I understand and acknowledge that I am fully responsible for carrying out the work or having the work carried out, in accordance with the requirements of the **British Columbia Building Code**, the **Building Bylaw No.** \_\_\_\_\_ and all other bylaws of the City of White Rock.
3. I will comply with, or cause those whom I employ to comply with the **British Columbia Building Code** and all bylaws of the City of White Rock and other statutes and regulations relating to the development, work, undertaking or permission in respect of which this application is made.
4. I understand and acknowledge that neither the issuance of a permit under **Building Bylaw No.** \_\_\_\_\_, the review of plans and supporting documents, nor inspections by a building official shall, in any way, constitute a representation, warranty, or statement that the **British Columbia Building Code, Building Bylaw No.** \_\_\_\_\_, or any other bylaw of the City of White Rock has been complied with.
5. If the material submitted in support of the application for this Building Permit included certification provided by Registered Professionals in the form of Schedules B-1 and B-2 referred in section 2.6 of Part 2 of the **British Columbia Building Code**, I understand and acknowledge that the City of White Rock and its building officials have relied on those letters of assurance as certification that the design and plans to which they relate comply with the **British Columbia Building Code** and other applicable enactments relating to safety.
6. In particular, I understand and acknowledge that the City of White Rock has relied on the letters of "Assurance of Professional Design and Commitment for Field Review" provided by:

\* Insert the name of the Registered Professionals where applicable below:

Architectural: \_\_\_\_\_

Building Envelope: \_\_\_\_\_

Structural: \_\_\_\_\_

Mechanical: \_\_\_\_\_

Plumbing: \_\_\_\_\_

Fire Suppression Systems: \_\_\_\_\_

Electrical: \_\_\_\_\_

Geotechnical: \_\_\_\_\_

In reviewing the plans and supporting documentation submitted with this application for a Building Permit.

- 7. I am authorized to make this acknowledgement of responsibility and give these undertakings to the City of White Rock.
- 8. I understand that it would be prudent for me to seek independent legal advice with respect to the responsibilities I am assuming upon the granting of a Building Permit by the City of White Rock pursuant to this application and in respect of the execution of this acknowledgement.

Signed this \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_

**Print Name**

\_\_\_\_\_

**Signature of owner  
(or signing officer if the owner is a corporation)**

Signed this \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_

**Witness**

\_\_\_\_\_

**Occupation**