



Occupant Load Information Sheet

Building Address: _____
 Business Name: _____ Business Phone: _____
 Previously Known As: _____
 Previously occupied (restaurant, pub, etc.): _____

Applicant Name: _____

Title: _____
 Address: _____
 City: _____ Postal Code: _____
 Phone: (day) _____ Fax: _____ Cell: _____

Is there a City of Surrey Council Resolution that stipulates the occupant load? Yes ____, No ____
 If so, what is the occupant load? _____ persons

Is there an existing approved Occupant Load: Yes ____, No ____, or Unknown ____
 If yes, is it issued or approved by City Building Div, Fire Dept or Fire Commissioner for
 _____ persons. Date: _____

Is Liquor Control and Licensing Branch approval required: Yes ____, No ____

Building permit# _____ (if applicable)

Is a Fire Alarm and Detection System provided: Yes ____, No ____

Is this occupant in a multi-tenant building: Yes: ____, No: ____

- If in a multi-tenant building, what is the total occupant load? _____ persons.

Under the B.C. Building Code Regulations:

- Washroom count: _____ persons
- Table 3.1.17.1. Occupant Load
 - Type of Use _____, Floor Area _____ sq.m /Area per person
 _____ = _____ persons
- Units of exits. Total width _____ mm/ _____ mm/per person = _____ persons

Under the B.C. Fire Code Regulations:

- Gross Floor Space: _____ sq.m. minus _____ sq.m. for obstructions = _____ sq.m.
 Reduced Floor Space: _____ minus _____ sq.m. for Means of Egress = _____
 sq.m.
 Net Floor Space: _____ sq.m. divided by 0.4 sq.m./ per person = _____ persons
 If applicable,
 - Non-fixed seating arrangements as per Article 2.7.1.5 _____ persons
 - Non-fixed seats and tables as per Sentence 2.7.1.5.3 _____ persons

Desired Occupant Load: _____ persons

The following Occupant Load is/are accepted.

Date: _____

I, Architect or Registered Professional hereby certify that the figures entered above represent a true and accurate calculation of the premises in question.

Return completed worksheet with scale drawings in person, Fire Hall 1 or email to fireprevention@surrey.ca and include a cheque (made payable to City of Surrey) OR

Visa or MasterCard in the amount of :

\$477.00 (up to 150 persons) _____
or \$795.00 (151+ persons) _____

Visa/MasterCard # _____ Signature _____

Name _____ Expiry date _____

to the Fire Prevention Office, 8767 - 132 Street, Surrey, B.C. V3W 4P1.

Fire Service use only:

Inspection Fee received: Initials: _____ Date: _____

Submission reviewed by: _____