

Module 4A – Appendix Design Certificate

Each Design Consultant listed in the Scope of Work must complete a Design Certificate for the Risk Areas that relate to the design documents they prepared or reviewed. Builders must submit these Design Certificates to Tarion not less than 30 days prior to the commencement of construction of the part(s) of the project that relate to the Risk Areas initialed below. Each Design Certificate must be accompanied by:

- A copy of the Design Consultant's Certificate of Authorization or Practice as applicable, and
- Proof of current professional liability insurance in accordance with the requirements their professional association.

Name of Project:	
Enrolment No.:	
Project Address:	
Vendor/Builder Name:	
Vendor/Builder Registration No.	

RISK AREAS

Each Design Consultant shall initial the Risk Areas related to the design documents that they have designed or reviewed and that are the subject of this declaration. Draw a line through Risk Areas that are the responsibility of others.

ITEM	RISK AREAS	INITIAL	ITEM	RISK AREAS	INITIAL
1	BELOW GRADE/FOUNDATIONS		3.2.5	Insulated Concrete Forms (ICF)	
1.1	Foundation bearing		3.2.6	Window wall	
1.2	Substructure		3.2.7	Load bearing masonry	
1.3	Drainage systems		3.2.8	Curtain wall	
1.4	Damp proofing or waterproofing		3.2.9	Other cladding systems	
1.5	Insulation		3.3	Concealed protections	
1.6	Elevator Sump Pits		3.3.1	External sealants	
2	STRUCTURE		3.3.2	Soffits	
2.1	Slabs; decks; beams; columns; walls		3.3.3	Architectural coatings; finishes; paint	
2.2	Expansion joints		3.4	Windows; glazing and exterior doors	
2.3	Slab protection systems		3.5	Thermal insulation	
2.4	Balcony protection systems		3.6	Air barrier; vapour retarder	
2.4.1	Balcony guards		4	ROOFING	
2.5	Wood/steel framing		4.1	Membrane; shingles or sloped metal	
3	EXTERIOR CLOSURE		4.2	Insulation; ballast	
3.1	Back-up wall; substrate		4.3	Vapour retarder; air barrier; ventilation	
3.2	Masonry veneer		4.4	Drainage	
3.2.1	Precast concrete		4.5	Snow and ice control	
3.2.2	Cast-in-place concrete		4.6	Safety tie-back anchors for building	
				maintenance	
3.2.3	Siding (non-decorative)		4.7	Green Roof Intensive, extensive	
3.2.4	Exterior Insulated Finish System (EIFS)				

Effective: January 1, 2017, for all projects with a construction start date of January 1, 2017 or later. Construction is considered to have started when the excavation begins.



5	FIRE SAFETY SYSTEMS	9	ELECTRICAL	
5.1	Containment	9.1	Distribution systems	
5.2	Egress	9.2	Lighting	
5.3	Suppression	9.3	Emergency power (see also 8.6)	
5.4	Detection and alarm	9.4	Intercom and security systems	
6	INTERIOR FINISH, COMMON AREAS	9.5	Fire stopping	
6.1	Corridors and stairwells	10	SITE WORK	
6.2	Party/common rooms	10.1	Pavements; curbs	
6.3	Sauna, whirlpool, fitness amenities	10.2	Retaining walls	
6.4	Swimming pool	10.3	Landscape structures (gazebos, decks)	
7	CONVEYING SYSTEMS	10.4	Fences	
	(ELEVATORS)			
7.1	Finishes	10.5	Irrigation systems	
8	MECHANICAL	10.6	Sod, trees and shrubs	
8.1	Heating; ventilation; air conditioning	10.7	Site services (as applicable)	
8.2	Plumbing – supply	11	ACOUSTICAL REVIEW	
			by Qualified Consultant	
8.3	Plumbing – drainage	11.1	Sound transmission – Suite to suite	
8.4	Waste disposal	11.2	Sound transmission – Interior	
			common areas (including elevator	
			shafts and all service spaces)	
8.5	Fire stopping	11.3	Sound transmission – Elevator	
			equipment	
8.6	Emergency power (see also 9.3)	11.4	Mechanical sound/vibration	
			transmission	
		11.5	Emergency electrical power, noise	
			rating of transformers	

DECLARATION

I, _______, the undersigned, being authorized in the Province of Ontario to provide professional services by virtue of

- a Certificate of Authorization (as issued by the Professional Engineers of Ontario),
- a Certificate of Practice (as issued by the Ontario Association of Architects), or
- a Certificate of Practice (as issued by the Ontario Association of Landscape Architects)

hereby declare that I have read and understand the requirements under Builder Bulletin 19R for design review and certification for this condominium project.

I confirm that I have initialed the Risk Areas above that relate to the design documents I provided or reviewed while engaged to provide professional services to the above referenced Vendor/Builder in connection with the above referenced condominium project.

Specifically, I am responsible for the production, or review, of all relevant construction documents included in my scope of services for the above noted condominium project. I shall provide copies of all applicable and significant change orders, reports and inspections to the FRC.

I further declare that to the best of my knowledge and information that my portion of the design/review complies with the Ontario Building Code and good design practice and in my view contains reasonable and sufficient detail to enable work to be completed in keeping with the general intent of the design. This declaration is being provided with respect to the specific scope of services in my retainer.



PRINT NAME OF DESIGN FIRM		•
ADDRESS	CITY	POSTAL CODE
ADDRESS	OTT	FOSTAL CODE
BUONE	F. 4.4.11	
PHONE	EMAIL	
PRINT NAME OF PERSON AUTHOURIZED TO BIND FIRM	SIGNATURE OF PERSON AUTHOURIZED TO BIND FIR	RM
POSITION	DATE	
PRINT NAME OF VENDOR/BUILDER REPRESENTATIVE	VENDOR/BUILDER REPRESENTATIVE'S SIGNATURE	
FRINT NAME OF VENDOR/BOILDER REFRESENTATIVE	VENDON/BOILDEN NEFNESENTATIVE 3 SIGNATORE	
VENDOD/DUIU DED COMPANY	DATE	
VENDOR/BUILDER COMPANY	DATE	