



City of Burnaby
 Building Division, Planning and Development Department
 2ND Floor, 4949 Canada Way, Burnaby, BC V5G 1M2
 Phone: 604-294-7130 Fax: 604-294-7986

CERTIFIED PROFESSIONAL (CP) PROGRAM SCHEDULE CP-2

Confirmation of Completion of Code Coordination Certified Professional Program An Alternate Building Permit Process	Schedule CP-2 For jurisdictions regulated by the British Columbia Building Code
--	--

Notes:

1. This letter is endorsed by the Architectural Institute of British Columbia and Engineers and Geoscientists British Columbia.
2. Words in italics are given the same meaning as defined in the British Columbia Building Code.
3. Words in quotations are defined in Schedule CP-1.

To: **Chief Building Inspector**
 City of Burnaby
 4949 Canada Way
 Burnaby, BC V5G 1M2

Date: _____

Project Address: _____

Building Permit No. _____

I confirm that I have fulfilled my obligations for “code coordination” as outlined in my previously submitted Schedule CP-1 entitled **Confirmation of Commitment by Owner and “Certified Professional”**.

I enclose the relevant occupancy documents as listed on the attached **Occupancy Submission Documents Checklist**.

NOTE:	A “Certified Professional” means an Architect or Professional Engineer who has been recognized as qualified as a “Certified Professional” by the Architectural Institute of British Columbia or Engineers and Geoscientists British Columbia.
--------------	--

“Certified Professional” (please print):

Name: _____

Name of Firm: _____

Address: _____

Telephone: _____

City: _____

Email: _____

Postal Code: _____

Signature: _____

(Affix “Certified Professional’s” stamp here)

(Affix “Certified Professional’s professional seal here)