

Name of Practice: Enter address and contact information here.



Name of Project: Enter name here.

Location: Enter address here.

Date:

**Ontario Building Code Data Matrix
Part 3**

**Building
Code
Reference ¹**

3.00	Building Code Version: _____	Last Amendment _____			
3.01	Project Type:	New Change of use Description: _____	Addition Addition and renovation	Renovation	
3.02	Major Occupancy Classification:	<u>Occupancy</u> _____ _____ _____	<u>Use</u> _____ _____ _____		
3.03	Superimposed Major Occupancies:	<input type="checkbox"/> No <input type="checkbox"/> Yes Description: _____			
3.04	Building Area (m ²)	<u>Description:</u> _____ _____ _____ _____	<u>Existing</u> _____ _____ _____ _____	<u>New</u> _____ _____ _____ _____	<u>Total</u> _____ _____ _____ _____
	<i>Insert additional lines as needed</i>	Total	_____	_____	_____

3.05	Gross Area (m ²)	<u>Description:</u> _____ _____ _____ _____ Total	<u>Existing</u> _____ _____ _____ _____ _____	<u>New</u> _____ _____ _____ _____ _____	<u>Total</u> _____ _____ _____ _____ _____	
		<i>Insert additional lines as needed</i>				
3.06	Mezzanine Area (m ²)	<u>Description:</u> _____ _____ _____ _____ Total	<u>Existing</u> _____ _____ _____ _____ _____	<u>New</u> _____ _____ _____ _____ _____	<u>Total</u> _____ _____ _____ _____ _____	
		<i>Insert additional lines as needed</i>				
3.07	Building Height	_____ Storeys above grade	_____ (m) Above grade			
		_____ Storeys below grade				
3.08	High Building	No	Yes			
3.09	Number of Streets/ Firefighter access	_____ street(s)				
3.10	Building Classification: (Size and Construction Relative to Occupancy)	_____	Group/Div _____			
3.11	Sprinkler System	Required	Not Required			
		<u>Proposed:</u>	entire building selected floor areas in lieu of roof rating	selected compartments basement none		
3.12	Standpipe System	Not required	Required			
3.13	Fire Alarm System	Required	Not required			
		<u>Proposed:</u>	Single stage	Two stage	None	
3.14	Water Service / Supply is Adequate	No	Yes			
3.15	Construction Type:	<u>Restriction:</u>	Combustible permitted	Non-combustible required		
		<u>Actual:</u>	Combustible	Non-combustible	Combination	
		<u>Heavy Timber Construction:</u>	No	Yes		

3.16	Importance Category:	Low Normal High Post-disaster	Low human occupancy Minor storage building	Post-disaster shelter Explosive or hazardous substances				
3.17	Seismic Hazard Index:	$(I_E F_a S_a (0.2)) = \underline{\hspace{2cm}}$ Seismic design required for Table 4.1.8.18. items 6 to 21: $((I_E F_a S_a (0.2)) \geq 0.35 \text{ or Post-disaster})$ <input type="checkbox"/> No <input type="checkbox"/> Yes						
3.18	Occupant Load	<u>Floor Level/Area</u>	<u>Occupancy Type</u>	<u>Based On</u>	<u>Occupant Load (Persons)</u>			
		_____	_____	_____	_____			
		_____	_____	_____	_____			
		_____	_____	_____	_____			
		_____	_____	_____	_____			
	<i>Insert additional lines as needed</i>							
3.19	Barrier-free Design:	<input type="checkbox"/> Yes <u>Explanation</u> <input type="checkbox"/> No						
3.20	Hazardous Substances:	<input type="checkbox"/> Yes <u>Explanation</u> <input type="checkbox"/> No						
3.21	Required Fire Resistance Ratings	<u>Horizontal Assembly</u>	<u>Rating</u>	<u>Supporting Assembly (H)</u>	<u>Noncombustible in lieu of rating?</u>			
		Floors over basement	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A			
		Floors	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A			
		Mezzanine	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A			
		Roof	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A			
3.22	Spatial Separation	<u>Wall</u>	<u>EBF Area (m²)</u>	<u>L.D. (m)</u>	<u>L/H or H/L</u>	<u>Required FRR (H)</u>	<u>Construction Type Required</u>	<u>Cladding Type Required</u>
		_____	_____	_____	_____	_____	Noncombustible	Noncombustible
		_____	_____	_____	_____	_____	Noncombustible	Noncombustible
		_____	_____	_____	_____	_____	Noncombustible	Noncombustible
		_____	_____	_____	_____	_____	Noncombustible	Noncombustible
	<i>Insert additional lines as needed</i>							

