



Name of Practice:		JASON PIZZICAROLA DESIGN - ARCHITECTS INC 209 RIDGE ROAD N, RIDGEWAY, ONTARIO, L0S 1N0 T. 905-894-8300 F. 905-894-8400 e-mail jpizzicarola@jpdesign.ca	
Name of Project:		72 UNIT APARTMENT DWELLINGS	
Location:		4280 Fourth Ave, Niagara Falls, ON L2E 4N2	
Item	Ontario Building Code Data Matrix Parts 3 or 9		Building Code Reference
			References are to Division B unless noted [A] for Division A or [C] for Division C.
1	Project Description:	<input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Change of Use	<input type="checkbox"/> Part 11 11.1 to 11.4 <input type="checkbox"/> Part 3 1.1.2. [A] <input checked="" type="checkbox"/> Part 9 1.1.2. [A] & 9.10.1.3
2	Major Occupancy(s)	C — Residential occupancies	3.1.2.1.(1) 9.10.2.
3	Building Area (m ²)	Existing New 2156.00 m ² Total 2156.00 m ²	1.4.1.2. [A] 1.4.1.2. [A]
4	Gross Area	Existing New 6468.00 sq.m Total 6468.00 sq.m	1.4.1.2. [A] 1.4.1.2. [A]
5	Number of Storeys	Above grade 3 Below grade 1	1.4.1.2. [A] & 3.2.1.1. 1.4.1.2. [A] & 9.10.4
6	Number of Streets/Fire Fighter Access	1	3.2.2.10. & 3.2.5. 9.10.20.
7	Building Classification	3.2.2.47. Group C, up to 3 Storeys	3.2.2.20.-83 9.10.2.
8	Sprinkler System Proposed	<input type="checkbox"/> entire building <input type="checkbox"/> selected compartments <input type="checkbox"/> selected floor areas <input type="checkbox"/> basement <input type="checkbox"/> in lieu of roof rating <input checked="" type="checkbox"/> not required	3.2.2.20.-83 3.2.1.5. 3.2.2.17. INDEX 9.10.8.2.
9	Standpipe required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3.2.9. N/A
10	Fire Alarm required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3.2.4. 9.10.18.
11	Water Service/Supply is Adequate	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	3.2.5.7. N/A
12	High Building	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3.2.6. N/A
13	Construction Restrictions	<input type="checkbox"/> Combustible permitted <input type="checkbox"/> Combustible <input type="checkbox"/> Non-combustible required <input type="checkbox"/> Non-combustible <input checked="" type="checkbox"/> Both	3.2.2.20.-83 9.10.6.
14	Mezzanine(s) Area m ²		3.2.1.1.(3)-(8) 9.10.4.1.
15	Occupant load based on	<input type="checkbox"/> m ² /person <input checked="" type="checkbox"/> design of building MAXIMUM 2 PERSONS PER SLEEPING ROOM	3.1.17. 9.9.1.3.
16	Barrier-free Design	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Explain) SINGLE FAMILY DWELLING	3.8. 9.5.2.
17	Hazardous Substances	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3.3.1.2. & 3.3.1.19. 9.10.1.3.(4)

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CERTIFICATE OF PRACTICE : # 4053

PROPOSED
STACKED
TOWNHOUSES

4280 Fourth Avenue
Niagara Falls

SHEET TITLE:
SITE PLAN

DRAWN BY: J.T.F. APPROVED: J.P.D.
SCALE: As indicated JOB #: 23020
SHEET NO: **SPA - 1**

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