Name of Practice:
Enter address and
contact information here.

Name of Project:
Enter name here.

Location:
Enter address here.

Date:
Enter address here.

	Ontario Building Code Data Matrix Part 9 Housing and Small Buildings					**Building Code Reference [1]**
9.00	Building Code Version:	O. Reg. 332/12	Last Amendment	O. Reg. 89/23		
9.01	Project Type:	☐ New Construction ☐ Addition ☐ Renovation ☐ Change of use ☐ Addition and renovation Description: _____				[A] 1.1.2..4.
9.02	Major Occupancy Classification:	Occupancy	Use			9.10.2.
		_____	_____			
		_____	_____			
		_____	_____			
9.03	Superimposed Major Occupancies:	☐ No ☐ Yes ☐ N/A Description: _____				9.10.2.3.
9.04	Building Area (m^2)	Description:	Existing	New	Total	[A] 1.4.1.2.
		_____	0	0	0	
		_____	0	0	0	
		_____	0	0	0	
	Insert additional lines as needed	_____	0	0	0	
		Total	0	0	0	

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9.05	Gross Area (m^2) *Insert additional lines as needed*	Description:	Existing	New	Total	[A] 1.4.1.2.
		_____	0	0	0	
		_____	0	0	0	
		_____	0	0	0	
		_____	0	0	0	
		Total	0	0	0	
9.06	Mezzanine Area (m^2) *Insert additional lines as needed*	Description:	Existing	New	Total	9.10.4.1.
		_____	0	0	0	
		_____	0	0	0	
		_____	0	0	0	
		_____	0	0	0	
		Total	0	0	0	
9.07	Building Height	0 Storeys above grade		0 (m) Above grade		[A] 1.4.1.2. & 9.10.4.
		0 Storeys below grade				
9.08	Number of Streets/ Firefighter access	0 street(s)				9.10.20.
9.09	Sprinkler System	☐ Required ☐ Not Required Provided: ☐ entire building ☐ selected compartments ☐ selected floor areas ☐ basement ☐ in lieu of roof rating ☐ none Description: _____				9.10.8.2.-4., and 3.2.4.8.(4)
9.10	Fire Alarm System	☐ Required ☐ Not required Proposed: ☐ Single stage ☐ Two stage ☐ None				9.10.18.
9.11	Water Service/ Supply is Adequate	☐ No ☐ Yes				9.31.3.
9.12	Construction Type:	Restriction: ☐ Combustible permitted ☐ Non-combustible required ☐ Encapsulated mass timber Actual: ☐ Combustible ☐ Non-combustible ☐ Combination of combustible and non-combustible ☐ Encapsulated mass timber ☐ Combination of encapsulated mass timber and non-combustible Heavy Timber Construction: ☐ No ☐ Yes				9.10.6., 3.1.5., and 3.1.4.7.

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9.13	Post-disaster Building	☐ No ☐ Yes	[A] 1.1.2.2.(2) and Part 4
9.14	Occupant Load	Floor Level/Area _____ Occupancy Type _____ Based On _____ Occupant Load (Persons) 0 Posted Limit Required _____ _____ _____ _____ 0 _____ _____ _____ _____ 0 _____ _____ _____ _____ 0 _____ *Insert additional lines as needed* Total: _____	9.9.1.3. Table 3.1.17.1.
9.15	Barrier-free Design:	☐ Yes Explanation _____ ☐ No	9.5.2. & 3.8
9.16	Hazardous Substances:	☐ Yes Explanation _____ ☐ No	9.10.1.3.
9.17	Required Fire Resistance Ratings	Horizontal Assembly / Fire Resistance Rating (H) / Supporting Assembly(H) / Noncombustible in lieu of rating? Floors over basement 0 0 ☐ No ☐ Yes ☐ N/A Floors 0 0 ☐ No ☐ Yes ☐ N/A Mezzanine 0 0 ☐ No ☐ Yes ☐ N/A Roof 0 0 ☐ No ☐ Yes ☐ N/A	9.10.8. and 9.10.11.
9.18a	Spatial Separation	Wall / EBF Area (m^2) / L.D. (m) / L/H or H/L / Required FRR (H) / % Unprotected Openings Permitted / % Unprotected Openings Provided _____ 0 0 0 0 _____ _____ _____ 0 0 0 0 _____ _____ _____ 0 0 0 0 _____ _____ *Insert additional lines as needed* _____ 0 0 0 0 _____ _____	9.10.14., 9.10.15.
9.18b	Spatial Separation Continued	Wall (repeated) / Construction Type / Cladding Type _____ _____ ☐ Noncombustible _____ _____ ☐ Noncombustible *Insert additional lines as needed* _____ _____ ☐ Noncombustible _____ _____ ☐ Noncombustible	9.10.14., 9.10.15.

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9.19a	Plumbing Fixture Requirements	Ratio: Male:Female = 50:50 Except as noted otherwise	9.31. & 3.7.4.

Floor Level/Area	Occupant Load	OBC Sentence	WCs Required	WCs Provided
	0		0	0
	0		0	0
	0		0	0
	0		0	0

Insert additional lines as needed

9.19b			

Floor Level/Area (repeated)	Barrier-free WCs Required	Barrier-free WCs Provided	Universal Washrooms Required	Universal Washrooms Provided
	0		0	0
	0		0	0
	0		0	0
	0		0	0

Insert additional lines as needed

9.20	Energy Efficiency:	Category:	12.2.1.

Non-residential Compliance Option:

- ☐ SB-10 Prescriptive (Div.4)
- ☐ SB-10 Performance (Div.2)
- ☐ SB-10 Prescriptive (Div.2)

Residential Compliance Option:

- ☐ SB-12 Prescriptive Compliance Packages
- ☐ SB-12 Performance Compliance
- ☐ SB-12 Other: Energy Star for New Homes
- ☐ EnerGuide for New Houses

Project Design Conditions:

Climatic Zone: _____

Fenestration	Gross Above Grade Wall or Roof Area (m^2)	Gross Fenestration Area (m^2)	Fenestration Ratio
Vertical (W+D)	0	0	0%
Skylights	0	0	0%

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		Space Heating Fuel ☐ Natural Gas ☐ Oil ☐ Electricity ☐ Propane ☐ Solid fuel ☐ Earth energy Heating Equipment Efficiency ☐ ≥92% AFUE ☐ ≥84% - <92% AFUE Other Conditions ☐ ICF Basement ☐ ICF Above Grade ☐ Walk-out Basement ☐ Slab-on-Ground ☐ Log/Post & Beam ☐ Blown-in Insulation Above Grade Wall ☐ Spray-applied Foam Insulation Above Grade Wall ☐ Drain Water Heat Recovery Unit Provided Compliance Package _____	SB-12 T3.1.1.2.A-C T3.1.1.3.A-C
9.21	Sound Transmission Design:	Is there more than 1 dwelling unit in the building? ☐ Yes ☐ No Option Implemented: Min STC rating of _____ Notes: _____	5.8.1.2., 5.8.1.4,, & 9.11.1.4.
9.22	Notes: *Insert additional lines as needed*	Is an alternative solution used? ☐ Yes ☐ No _____ _____ _____	

1 *All references are to Division B of the OBC, unless preceded by [A] for Division A and [C] for Division C.*

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