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# LETTER OF ASSURANCE

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## ASSURANCE OF PROFESSIONAL DESIGN AND COMMITMENT FOR INSPECTION

Date: \_\_\_\_\_

RE: \_\_\_\_\_  
Project Name and Address

The undersigned hereby gives assurance that the design of the (initial applicable item/items)

- \_\_\_\_\_ **Farm Buildings / Part 2 MBC**
- \_\_\_\_\_ **Architectural / Part 3 & Part 5 MBC**
- \_\_\_\_\_ **Structural Part 4 MBC**
- \_\_\_\_\_ **Mechanical Part 6 MBC**
- \_\_\_\_\_ **Plumbing Part 7 MBC**
- \_\_\_\_\_ **Fire Suppression Systems – Automatic Sprinkler System**
- \_\_\_\_\_ **Electrical**
- \_\_\_\_\_ **Exhaust & Suppression System**
- \_\_\_\_\_ **Fire Alarm & Detection System**
- \_\_\_\_\_ **Energy Code – MECB Coordinator**

Components of the project as shown on the plans and supporting documents prepared by this registered professional conform to all the applicable requirements of all applicable Acts, Regulations and By-Laws.

Further, the undersigned will be responsible for inspections for the above-referenced components during construction, and as also required by Manitoba Building Code, Division C, Subsection 2.2.7 Review of Work.

The undersigned also assures competence in the necessary fields of expertise to undertake the project on the basis of training, ability and expertise in the appropriate professional and technical disciplines.

As used herein, inspections shall mean such reviews of the work at the project site and at fabrication locations, where applicable, as the registered professional, on the basis of professional discretion, considers necessary in order to ascertain that the work conforms in all respects to the plans and supporting documents prepared by this registered professional for which the Building Permit is issued. This includes keeping records of all site visits and any corrective action taken as a result thereof. Copies of the inspection reports will be provided to the authority having jurisdiction upon request.

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Print Name	Sign Name	Date
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Address: \_\_\_\_\_  
Phone No.: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**AFFIX  
Professional Seal  
Here →**



If the Registered Professional is a member of a firm, complete the following:  
I am a member of the firm \_\_\_\_\_  
and I sign this letter on behalf of the firm and myself. (Print name of firm)