



City of Mississauga
Mississauga Fire & Emergency Services
Fire Prevention and Risk Reduction
300 City Centre Drive, 2nd fl.
Mississauga, ON L5B 3C1
T 905-896-5908 / F 905-896-5498
fire.prevention@mississauga.ca
www.mississauga.ca/fire
X [@MississaugaFES](https://twitter.com/MississaugaFES)

Attention: Fire Route Applicants

Enclosed is a fire route application form for the designation of a Fire Access Route as required in By-law #0216-2023, as amended.

The application form is to be completed in full and accompanied by the processing fee as described in the current Fees and Charges By-law.

NOTE: At the time of composing this information package, our processing fee is \$254.38+ \$33.07 HST = **\$287.45** (once you email us your application, admin staff will contact you to process the credit card payment).

The submission is to include a PDF drawing of the fire route plan which will be inserted into a template (by our office) that measures 24cm high x 21cm wide.

The drawing is to be a simplified (and legible) version of the approved site plan (or redrawn facsimile).

The drawing is to indicate the building outline, the fire route, municipal streets, and the municipal address. The drawing is also to identify the principal entrances, fire hydrants, fire department connections, and parking which abuts the fire route.

The application form and the fire route plan are to be submitted to this department by email at: fire.prevention@mississauga.ca.

Processing will be conducted by staff, a drawing number assigned and the location, type and quantity of signage indicated on the plan.

Once completed, a copy of the official Fire Access Route plan will be returned to the property owner (or owner's representative) so that the installation in conformance with this plan can begin.

Should any further information or assistance be required, please do not hesitate to contact this department at 905-896-5908.

Encl.

**THE CORPORATION OF THE CITY OF MISSISSAUGA
DESIGNATION OF FIRE ROUTES
BY-LAW # 0216-2023 AS AMENDED**

Please consider this application for the designation of FIRE ACCESS ROUTE(S):

APPLICANT FIRM: _____

APPLICANT NAME: _____ PHONE # _____

APPLICANT EMAIL: _____

APPLICANT ADDRESS: _____

OWNER'S NAME: _____ PHONE # _____

OWNER'S ADDRESS: _____

BUILDING ADDRESS: _____

PERMIT NUMBER: _____

Date Applicant Signature

IMPORTANT: ENTIRE APPLICATION MUST BE COMPLETED AND MUST BE ACCOMPANIED WITH A COPY OF A THE FIRE ROUTE PLAN. IF NOT, THIS APPLICATION WILL NOT BE PROCESSED.

OFFICE USE ONLY

The following section is to be completed by the Mississauga Fire and Emergency Services:

APPLICATION NUMBER: _____ DATE OF RECEIPT: _____