

1. General	
A. Name of the Project:	B. Date:
C. Address of Application:	D. Name of Consultant:
E. Phone number and email of the Consultant:	

2. Project Description	
A. Short Description of the Project:	
B. Number of buildings for this Application:	
C. Number of Floors :	D. Height in Metres :
E. Did you submit the 3d Model for this project? ☐ Yes ☐ No File Format Submitted:	

3. Massing Information	
A. Software Used ☐ SketchUp ☐ Revit ☐ Other If Other describe below:	B. Terrain Corrected : ☐ Yes ☐ No
C. 3D Massing Context Tile Used (Open Data) – <i>Please provide date of obtaining data</i> Tiles: 50K, 51K, 50J, 51J	

4. Massing Model Location	
A. Coordinates Used: Longitude: Latitude :	B. Solar North Matches True North? ☐ Yes ☐ No

5. Shadow Diagrams Information	
A. Are you fully compliant with all of the technical specifications in the Terms of Reference? ☐ Yes ☐ No	
B. Do the Shadow Diagrams use a standard metric scale? ☐ Yes ☐ No	
C. Are the Shadow Diagrams provided in Colour? ☐ Yes ☐ No	

D. Does the Shadow Diagrams use The City's Shadow Study Drawing Standards – Colour Analysis?

☐ Yes ☐ No

5. Shadow Diagrams Information – Continued

D. Date Used for Shadow Analysis : Year _____ Month(s) March, June, September, December

E. Daylight Savings Time considered? ☐ Yes ☐ No

6. General Comments

Declaration of Consultant

I _____,

(Print name)

certify that I have examined the contents of the application, certify that the information submitted with it is accurate and concur with the submission of the application.

Date: _____

Signature of Consultant: X 

Please send the completed form with Sun Shadow Analysis package to:

If you require further assistance, please contact: Abdullah.diab@toronto.ca or Dulini.ratnayake@toronto.ca