

## ELECTRICAL PERMIT APPLICATION

Roll Number: \_\_\_\_\_ Development Number: \_\_\_\_\_

Application Date (DD/MMM/YYYY): \_\_\_\_\_ Estimated Project Completion Date (DD/MMM/YYYY): \_\_\_\_\_

Applicant Type:  Homeowner  Contractor Cost of Installation (Labour & Material) \$ \_\_\_\_\_

The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act. A permit may expire if the undertaking to which it applies: (a) is not commenced within 90 days of issue of the permit, (b) is suspended or abandoned for a period of 120 days. An extension can be considered when applied for in writing prior to permit expiry date.

Home Owner Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**Owner's Signature / Declaration (Single Family Residential Only)**

"I hereby declare I am the owner of the premises in which the work will be conducted, and reside or will reside on the property. I am doing the work myself, and assume responsibility for compliance with the applicable Act and Regulations"

Applicant/Contractor Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_ Master Electrician Number

\_\_\_\_\_ Master Electrician Name

\_\_\_\_\_ Master Electrician Signature

**Project Location in the City of Cold Lake:**

Street Address: \_\_\_\_\_

Legal Subdivision: Part of: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ West of: \_\_\_\_\_

Subdivision Name: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_

**BUILDING TYPE:**

- Single / Multi Family Dwelling
- Commercial
- Accessory
- Industrial
- Institutional
- Square Feet: \_\_\_\_\_

**TYPE OF WORK:**

- New Work
- Renovation
- Connection
- Temporary Service
- Other

**SERVICE INFORMATION:**

- Does this installation Require a Service Connection  
 Yes  No
- SUPPLY SERVICE:**  Overhead  Underground
- Service Information: Amps: \_\_\_\_\_  
 Volts: \_\_\_\_\_  
 Phase: \_\_\_\_\_

Description of Work: \_\_\_\_\_

Payment Type:  Cash  Cheque  On Account  Interac

Permit Fee: \$ \_\_\_\_\_

Admin Fee: \$ \_\_\_\_\_

+ SCC Levy\*: \$ \_\_\_\_\_

Total Cost: \$ \_\_\_\_\_ Receipt #: \_\_\_\_\_

\*\$4.50 or 4% of the permit fee maximum \$560.00

**OFFICE USE ONLY**

Issuing Officer's Name: \_\_\_\_\_

Issuing Officer's Signature: \_\_\_\_\_

Designation Number: \_\_\_\_\_

Permit Issue Date: (DD/MMM/YYYY): \_\_\_\_\_

PLEASE CONTACT THE INSPECTIONS GROUP INC FOR INSPECTIONS. PRIOR TO COVER OR CONCEALMENT ALLOWING TWO WORKING DAYS NOTICE AND PROVIDE SAFE ACCESS.  
 5513 – 48 Avenue, Cold Lake, AB • T9M 1A1 • Phone: 780 594 4494 • Fax: 780 594 3480

The personal information provided as part of this application is collected under the Safety Codes Act and the Municipal Government Act and in accordance with the Freedom of Information and Protection of Privacy Act. The information is required and will be used for issuing permits, safety codes compliance verification and monitoring, and property assessment purposes. The name of the permit holder and the nature of the permit is available to the public upon request. If you have any questions about the collection or use of the personal information provided, please contact the Municipality.