



GAS 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"

Contractor/Company Name: _____ Mailing Address: _____

City: _____ Prov: _____ Postal Code: _____ Phone: _____ Fax: _____

Cell: _____ Email: _____

Installer's Number _____

Print Installer's Name _____

Installer's 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: _____

TYPE OF OCCUPANCY:

- Residential
- Commercial
- Industrial
- Oilfield/Gas
- Institutional
- Mobile
- Manufactured

NUMBER OF OUTLETS:

- Furnace _____
- Water Heater _____
- Fireplace _____
- Dryer _____
- Unit Heater _____
- Range _____
- Room Heater _____
- Boilers _____
- Conversion _____
- Replacement Appliance _____
- Secondary Risers _____
- Barbeque _____
- Other _____
- Total _____

COMMERCIAL / INDUSTRIAL ONLY:

Total BTU _____

Name of Gas Supplier _____

DESCRIPTION OF WORK FOR ALL GAS PERMITS:

PROPANE INSTALLATION:

No. of Tanks _____

Tank Size _____

Serial # _____

- Vaporizer
- Refill Centre
- Service Line from Tank to Building
- Temporary Heat

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.