

## Electrical Permit Application

Permit Label

Other Permits Required:  Building  Plumbing  Gas  PSDS      Supply Service Required:  Yes  No  
 Permit Type:  Owner  Contractor      Development Permit Number: \_\_\_\_\_  
 Application Date (M/D/Y): \_\_\_\_\_      Estimated Completion Date (M/D/Y): \_\_\_\_\_

**Owner:** \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Cell Number: \_\_\_\_\_ Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Contractor:** \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Cell Number: \_\_\_\_\_ Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Project Location: Name of Municipality:** \_\_\_\_\_  
 Street or Rural Address: \_\_\_\_\_ Subdivision or Hamlet Name: \_\_\_\_\_  
 Unit or Suite #: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_ Tax Roll #: \_\_\_\_\_  
 Legal Subdivision: Part of: \_\_\_\_\_ ¼ Sect: \_\_\_\_\_ Twp: \_\_\_\_\_ Rge: \_\_\_\_\_ W of: \_\_\_\_\_  
 Directions: \_\_\_\_\_

**Project Information:**  Commercial  Residential  Multi Family  Industrial  Institutional  Oil & Gas  
**Type of Work:**  New  Renovation  Addition  Accessory Building  Basement Dev.  Connection Only  Temp Service  Other  
**Service:** Amperes: \_\_\_\_\_ Voltage: \_\_\_\_\_ Phase: \_\_\_\_\_  Underground  Overhead  

<b>Detailed Description of Work:</b>	Main Floor: _____ sq. ft.
	2 <sup>nd</sup> Floor: _____ sq. ft.
	Dev. Basement: _____ sq. ft.
	Attached Garage: _____ sq. ft.

**Permit Applicant Declaration:** The permit applicant certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations and work will commence within 90 days. The permit applicant/owner acknowledges that as per Section 12(2) of the Alberta Safety Codes Act; Superior Safety Codes Inc. is not liable for any decision related to the system of inspections, examinations, evaluations and investigations including but not limited to a decision relating to their frequency and the manner in which they are carried out. The personal information provided on this form is protected by the Freedom of Information and Protection of Privacy Act.

Master's Name (Please print) \_\_\_\_\_ Master's Signature \_\_\_\_\_ Homeowner's Signature (Homeowner permits only) \_\_\_\_\_  
 Master's Certification Number \_\_\_\_\_ *Homeowner Declaration: By signing this permit I hereby certify that I own or will own and occupy this dwelling.*

**Project Value (Materials & Labour):** \$ \_\_\_\_\_ **Total Developed Area:** \_\_\_\_\_ Sq. Ft  
**Permit Fee:** \$ \_\_\_\_\_ **\*SCC Levy:** \$ \_\_\_\_\_ **TOTAL FEE:** \$ \_\_\_\_\_ *\*SCC Levy is 4% of the permit fee with a minimum of \$4.50 and a maximum of \$560*  
 Payment Method:  Visa  M/C  Debit  Cheque  Cash  
 Credit Card #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_ Cheque Number \_\_\_\_\_  
 Name of Cardholder: \_\_\_\_\_ Signature of Cardholder: \_\_\_\_\_

**Permit Validation Section to be completed by the Permit Issuer:**  
 Special Conditions: \_\_\_\_\_  
 Permit Issuer's Name (print or type) \_\_\_\_\_ Permit Issuer's Signature \_\_\_\_\_  
 Permit Issuer's Designation Number: \_\_\_\_\_ Date of Issue (M/D/Y): \_\_\_\_\_