



**Summer Village of
Island Lake**
PO Box 568
BRUDERHEIM AB T0B 0S0
Phone: 780 237 2207
www.islandlake.ca

The Inspections Group Inc.
12010 – 111 Avenue NW
EDMONTON AB T5G 0E6
Phone: 780 454 5048 Toll Free: 1 866 554 5048
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www.inspectionsgroup.com

PLUMBING PERMIT APPLICATION FORM

Permit #: _____

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.

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".

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 Summer Village of Island Lake:
Street Address: _____
Legal Subdivision: Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____
Subdivision Name: _____ Lot: _____ Block: _____ Plan: _____
Directions: _____

TYPE OF OCCUPANCY:	NUMBER OF FIXTURES:	WATER AND OR SEWER SERVICE:	PLUMBING DESCRIPTION OF WORK:
<input type="checkbox"/> Residential	Kitchen Sinks _____	<input type="checkbox"/> Disconnect from Septic Connect to Municipal Sewer	_____
<input type="checkbox"/> Farm/Ranch	Basins _____	<input type="checkbox"/> Water and/or Sewer Services	_____
<input type="checkbox"/> Commercial	Showers _____	<input type="checkbox"/> Mobile Home / Factory Assembled Building Connection	_____
<input type="checkbox"/> Industrial	Laundry _____	Seasonal Property? <input type="checkbox"/> Yes <input type="checkbox"/> No	_____
<input type="checkbox"/> Oilfield/Gas	Toilets _____		_____
<input type="checkbox"/> Institutional	Washers _____		_____
<input type="checkbox"/> Mobile	Bathtubs _____		_____
<input type="checkbox"/> Manufactured	Floor Drains _____		_____
	Grease Traps _____		_____
	Bidets/Water Fountains _____		_____
	Urinals _____		_____
	Other _____ <small>(Describe in description of work)</small>		_____

Payment Type: Cash Cheque C/C Agreement Interac
Permit Fee: \$ _____
+ SCC Levy*: \$ _____
Total Cost: \$ _____ Receipt #: _____
*\$4.50 or 4% of the permit fee maximum \$560.00

TIGI OFFICE USE ONLY
Issuing Officer's Name: _____
Issuing Officer's Signature: _____
Designation Number: _____
Permit Issue Date: DD / MMM / YYYY

**REMIT PAYMENT AND APPLICATION TO THE INSPECTIONS GROUP INC.
PLEASE CONTACT THE INSPECTIONS GROUP INC. PRIOR TO COVER OR CONCEALMENT FOR INSPECTIONS
ALLOWING 2 - 5 WORKING DAYS NOTICE AND PROVIDE SAFE ACCESS.**

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.