

Village of Holden

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The Inspections Group Inc.

Phone: (780) 454-5048 Toll Free: (866) 554-5048 (780) 454-5222 Toll Free: (866) 454-5222

www.inspectionsgroup.com

ELECTRICAL PERMIT APPLICATION FORM

Application Date:DD_/_MMM_/_YYYY_	_	Estimated Project Completion Date:DD / MMM / YYYY			
Applicant Type: Homeowner Contra	d in accordance with the Al	Cost of Installation (Labour & Material) \$_ accordance with the Alberta Safety Codes Act. A permit may expire if the undertaking to which it applies: (a) is not commenced within 90			
ays of issue of the permit, (b) is suspended or abandone	ed for a period o	of 120 days. An extension c	can be conside	red when applied f	for in writing prior to permit expiry date.
Owner Name:			Mailin	g Address:	
City:	Prov:	Postal Code:		Ph	one: Fax:
				Cell:	Email:
Owner's Signature / Declaration (Single "I hereby declare I am the owner of the premise for compliance with the applicable Act and Regi	es in which the	esidential Only)		e or will reside o	on the property. I am doing the work myself, and assume responsibility
Company Name:			Mailin	g Address:	
City:	Prov:	Postal Code: _		Ph	none:Fax:
Cell:	Email: _				
Master Electrician Number	<u> </u>	Master Electrician Name			Master Electrician Signature
Project Location in the Village of Holde					
Street Address:		_			Tax Roll #:
Legal Subdivision: Part of:	Section	i	Township	:	Range: West of:
Subdivision Name:			Lot:	Blo	ck: Plan:
Directions:					
BUILDING TYPE:	1	TYPE OF WORK:			SERVICE INFORMATION:
☐ Single / Multi Family Dwelling	[[☐ New Work			Does this installation Require a Service Connection
☐ Commercial	[[☐ Renovation			Yes No
Residential	[[☐ Connection			SUPPLY SERVICE: Overhead Underground
☐ Industrial	[☐ Temporary Service			Service Information: Amps:
☐ Institutional		☐ Other			Volts:
Square Feet:		_			Phase:
oquare : ss					
Description of Work:					
• •				FINAL Accept Other: Decline ants must select 2 stages of inspection	
(Applicant Signature)			ors may sele n (plus Levy		ection, additional selected inspections will be charged at \$110/
Payment Type: Cash Chequ	e C/C	Agreement In	iterac		TIGI OFFICE USE ONLY
Permit Fee: \$				Issuing Office	er's Name:
+ SCC Levy*: \$				Issuing Office	er's Signature:
Total Cost: \$		Receipt #:	[Designation N	Number:
*\$4.50 or 4% of the permit fee maximum \$560.0	00			Permit Issue	Date:DD / MMM / YYYY

REMIT PAYMENT AND APPLICATION TO THE INSPECTIONS GROUP INC.

PLEASE CONTACT THE INSPECTIONS GROUP INC. PRIOR TO DRYWALL FOR INSPECTIONS ALLOWING 2 - 5 WORKING DAYS NOTICE AND PROVIDE SAFE ACCESS