

Village of Ryley

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www.ryley.ca

The Inspections Group Inc.

12010 – 111 Avenue Edmonton, AB T5G 0E6

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GAS PERMIT APPLICATION FORM

Application Date: DD	Estimated Project Completion Date:DD / MMM / YYYY					
Applicant Type: Holder hereby certificates of issue of the permit, (b) is	omeowner	in accordance with the A 120 days. An extension o	alberta Safety C	Cost of Installation (Lab odes Act. A may permit expire if the ad when applied for in writing prior to	oour & Materi undertaking to wh permit expiry date.	al) \$ich it applies: (a) is not commenced within 90
Owner Name:			Mailing	Address:		
City:	Prov:	Postal Code:		Phone:		_Fax:
-		C	ell:	Email: _		
"I hereby declare I am the	Declaration (Single Family Res owner of the premises in which the voplicable Act and Regulations"		d, and reside	or will reside on the property. I a	am doing the wo	rk myself, and assume responsibility
Company Name:			Mailing	Address:		
City:	Prov:	Postal Code:		Phone:		_Fax:
Cell:	Email:					
Installer's Number		Installer's Name		In	staller's Signa	turo
		Ilistaller's Name		111	staller's Signa	luie
Project Location in th	0 , ,			Toy Do	.11 44.	
			ip: Range: West of:			
Subdivision Name:			Lot:	Block:	Plan:	
Directions:						
TYPE OF OCCUPANCY:	NUMBER OF OUTLETS:		COMMERC ONLY:	IAL/INDUSTRIAL APPLICA	ATION	PROPANE INSTALLATION:
☐ Residential	Furnace		Total BTU			No. of Tanks
☐ Farm/Ranch	Water Heater Fireplace		Name of Ga	s Supplier		Tank Size
	Dryer					Serial #
☐ Commercial	Unit Heater		DESCRIPTI	ON OF WORK FOR ALL G	AS	
☐ Industrial	Range		PERMITS:	1011 01 11 01 11 11 11 11 11 11 11 11 11		
☐ Oilfield/Gas	Room Heater					☐ Vaporizer☐ Refill Centre
☐ Institutional	Boilers Conversion	-				Service Line from Tank
						to Building
☐ Mobile		-				☐ Temporary Heat
☐ Manufactured	Barbeque					
	Other					
	erstand and acknowledge the selecte al inspections requested may be char			n. Accept	Accept Decline	Other:
(Applicant Signature)				_ `	•	d at\$110/ Inspection (plus Levy)
Payment Type: ☐ Cash ☐ Cheque ☐ C/C Agreement ☐ Interac				TIGI OFFICE USE ONLY Issuing Officer's Name:		
Permit Fee: \$				Issuing Officer's Signature:		
+ SCC Levy*: \$				Designation Number:		
Total Cost: \$ Receipt #:				Permit Issue Date:DD_ / _MMM_ / _YYYY		
*\$4.50 or 49/ of the normi						