| Ĝ | Safety  |
|---|---------|
|   | Codes   |
|   | Council |



The Inspections Group Inc. 101E-14310 111 Avenue NW Edmonton, AB T5M 3Z7 Phone: (780) 454-5048 / 1(866) 554-5048 Fax: (780) 454-5222 / 1(866) 454-5222 Email: questions@inspectionsgroup.com

| Alberta Safety Codes Authority  | Electrical Permit Appr   |   |
|---|--|---|
| Permit Applicant: Owner<br>Application Date (mm/dd/yyyy<br>Development Permit No. (if an  | ): Estimate  | d Start Date ( <i>mm/dd/yyyy</i> ):<br>d Completion Date ( <i>mm/dd/yyyy</i> ):   |
| Building Permit No. (if applicab  | //////////////////////////////////////   | Work (labour & materials):  |
| Owner Name (printed):   |  |   |
| Mailing Address:  | City/Town/Village:   | Province: Postal Code:  |
|   |  | Fax #:  |
|   | e (printed):   | _ Contact Name (printed):<br>Province: Postal Code:   |
| *Email:   | City/Town/Village:<br>Owners Phone #:  | Postal Code   |
| Project Location  |  |   |
|   |  | Tax Roll No.:   |
| Street/ Rural Address:<br>* Legal land description is requi   |  | Unit:   |
| Lot: Block:<br>Directions:  | Plan: LSD: Quarter:  | _ Section: Township: Range: West of:  |
|   | provide a <b>complete</b> and <b>detailed</b> description of the work to be comple | ted including all applicable drawings/ documents):  |
|   |  |   |
|   |  |   |
|   |  |   |
| □Work has not started □Work is in progress □Work is complete<br>WORK SHOULD NOT COMMENCE BEFORE PERMIT IS ISSUED / WORK MUST BE INSPECTED BEFORE COVERING |  |   |
| TYPE OF OCCUPANCY   | TYPE OF WORK   | SERVICE AND INSTALLATION AREA   |
| □Single Family Residential  | □New   | □Overhead □Underground  |
| □Multi-Family Residential   | □Addition  | Amps: Volts: Phase:   |
| # of units:   | Renovation/Alteration (interior)   |   |
| □Agricultural (Farm)<br>□Commercial   | □Installation of Service (panel/meter/service upgrade)                             | □Feet <sup>2</sup> □Meters <sup>2</sup>   |
|   | Service Connection (energizing the site/ mobile home/ buildin equipment)           |   |
|   | □Improvements (A/C/ hot tub/ basement development/ etc.)                           | 2 <sup>nd</sup> Floor ( <i>loft/ mezzanine</i> ):   |
| □Other ( <i>specify</i> ):  | □Temporary Service   | Basement Development: □Yes □No  |
|   | □Annual Permit   | Garage/ Shop:   Attached  Detached  |
|   | □Alternative Energy  |   |
|   | □Solar □Wind □Other (specify):   | Other (specify):  |
|   | Other (specify):   | Total Installation Area:  |
| applications, issuing permits, safety cod   | es compliance monitoring, verification, and program evaluation. The name of the p  | erta Freedom of Information and Protection of Privacy Act. It is used for processing permit<br>ermit holder and nature of the permit may be included on reports provided to a municipality<br>ASCA Coordinators at 1-888-413-0099 or at Suite 500, 10405 Jasper Avenue, Edmonton, |
| Master Electrician Name (plea   | se print) Certification No   | . Master Electrician Signature  |
| Homeowner's Signature (home   | cowner permit only) Homeowner Declaration: I hereby declare I am t                 | ne owner of the premises in which the work will be conducted and reside or  |
|   | ing the work myself, and assume responsibility for compliance with the             |   |
|   | OFFICE USE ONLY  |   |
| Other Permits Required 🗆 B  | uilding 🗆 Plumbing 🗆 Gas 🗆 Private Sewage 🗆 Not Applica                            | ble [Received Date Stamp]   |
| Permit Fee: \$  |  |   |
| SCC Levy: \$  |  |   |
| (\$4.50 or 4% of the permit fee maximum   |  |   |
| Travel Fee: \$  | —  |   |
| Total Cost: \$  |  |   |
| Receipt No.:  | <u> </u>   | eSITE Permit No.:   |
| □Invoiced □Cash □Cheque   |  | Agency File No.:  |
| □Credit Card □Visa □MC (a   | ttach signed credit card authorization form)                                       |   |

Visit <u>Where to get a Permit</u> to find out where to submit your application. \* Email address fields and legal land description are required to be completed. See permit guidelines for details.