

TOWN OF BONNYVILLE

SUBMIT APPLICATION TO:

permits@town.bonnyville.ab.ca or Fax: 780 826 4806



	BUILDING P	ERMIT	APPLICATION	
		Builders Licence:		
Roll Number:		Development Number:		
Application Date (DD/MM/YYYY): Estimated Project Completion Date (DD/MM/YYY):				
Applicant Type: Homeowner C			•	e including Equipment) \$ ie undertaking to which it applies: (a) is not commenced within 90 days
of issue of the permit, (b) is suspended or abandom **3 Sets of plans / specifications & payment mu	ned for a period of 120 days. An extension can be	considered w	when applied for in writing prior to	permit expiry date.
		Mailing	Address:	
City:	Prov: Postal Code:		Phone:	Fax:
				Email:
Owner's Signature / Declaration (Single "I hereby declare I am the owner of the premise applicable Act and Regulations"	e Family Residential Only)			he work myself, and assume responsibility for compliance with the
		Mailing	Address	
				Fax:
Cell:	Email:			
Contractor/Architect/En	gineer Name			Signature
Project Location in the Town of Bonny	•			Work: Onot started in progress complete
	vinc.		Тах	Roll #:
				: West of:
				Plan:
Directions:				/
BUILDING TYPE:	TYPE OF WORK:	BUIL	DING USE:	BUILDING AREA IN SQ. FT.:
Dwelling Unit	New Construction	_	ingle/Multi Residential	Number of stories
Detached/Attached Garage	□ Relocation		commercial	Main area
Accessory Building	Addition		ndustrial	2 nd floor
Basement Development	Renovation	🗆 Ir	nstitutional	Basement
Deck	Demolition		oil & Gas	Garage
Wood Burning Stove/Fireplace	Change of Occupancy		other (specify)	Total Area
Certification #	Manufactured Home*			Deck
Foundation Type	Modular Home*			
	*CSA #			Basement developed at time of construction?
Other (specify)	COA #	-		🗆 Yes 🔲 No
Description of Work:				
	rmance Trade-Off Prescriptive ngle or multiple sections; is ready for resid ctions; sections have no chassis, running g			up.
	☐ Interac ☐ M/C ☐ Visa			he Inspections Group Inc.
Permit Fee: \$				110 – 4910 50 Avenue COLD LAKE, AB T9M 0G1
+ SCC Levy*: \$				0) 594 4301 Toll Free: (888) 853 6411 0) 594 3720 Toll Free: (844) 750 3721
Total Cost: \$	Receipt #:			www.inspectionsgroup.com
*\$4.50 or 4% of the permit fee maximum	\$560.00		q	uestions@inspectionsgroup.com

PLEASE CONTACT THE INSPECTIONS GROUP INC FOR INSPECTIONS. PRIOR TO COVER OR CONCEALMENT ALLOWING TWO 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.