

Village of Chipman PO Box 176, 4816 50 St. Chipman, AB T0B 0W0 Phone: (780) 363 3982

(780) 363 2386 chipmanab@mcsnet.ca



## **GAS PERMIT APPLICATION FORM**

Application Date:DD / MMM / YYYY		Estimated Project Completion Date: DD / MMM / YYYY			
Applicant Type: Homeowner Contractor Cost of Installation (Labour & Material Including Equipment) \$ The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act. A may permit expire if the undertaking to which it applies: (a) is not commenced within 90 yes 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:Email:Email:					
Company Name:		Mailin	g Address:		
City:	Prov:	Postal Code:	Phone:	Fax:	
Cell:	Email:				
Installer's Number Print Installer's Name Installer's Signature				r's Signature	
Project Location in Big Lakes County:					
Street Address:			Tax Roll #:		
Legal Subdivision: Part of: _	Section:	Township	Range:	West of:	
Subdivision Name:         Lot:         Block:         Plan:					
Directions:					
TYPE OF OCCUPANCY:	NUMBER OF OUTLETS:	СОММЕ	RCIAL/INDUSTRIAL APPLICATION O	NLY: PROPANE INSTALLATION:	
☐ Residential	Furnace	Total B7	·U	No. of Tanks	
☐ Farm/Ranch	Water Heater	Name o	Gas Supplier	Tank Size	
☐ Commercial	Fireplace			Serial #	
☐ Industrial	Dryer	DESCR	PTION OF WORK FOR ALL GAS PER	MITS:	
_	Unit Heater Range	<del></del>			
☐ Oilfield/Gas	Room Heater			☐ Vaporizer☐ Refill Centre	
☐ Institutional	Boilers			☐ Service Line from Tank	
☐ Mobile	Conversion			to Building	
☐ Manufactured	Replacement Appliance			☐ Temporary Heat	
	Secondary Risers			☐ ANNUAL PERMIT	
	Other				
Payment Type:	☐ Cheque ☐ Interac				
			The Inspections Group Inc. 300W. 14310 – 111 Avenue NW		
Permit Fee: \$			Edmonton AB T5M 327 Phone: (780) 454 5048 T0Il Free: (866) 554 5048		
+ SCC Levy*: \$			Findle: (780) 454 5046 Foll Free: (866) 354 5046 Fax: (780) 454 5222 Toll Free: (866) 454 5222		
Total Cost: \$ Receipt #:			www.inspectionsgroup.com		
*\$4.50 or 4% of the permit fe	e maximum \$560.00		questions@	inspectionsgroup.com	

REMIT PAYMENT AND APPLICATION TO THE INSPECTIONS GROUP INC.

PLEASE CONTACT THE INSPECTIONS GROUP INC. 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.