

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 days 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: _____

Owner's Signature / Declaration (Single Family Residential Only)

"I hereby declare I am the owner of the premises in which the work will be conducted, and reside or will reside on the property. I am doing the work myself, and assume responsibility for compliance with the applicable Act and Regulations"

 Company Name: _____ Mailing Address: _____
 City: _____ Prov: _____ Postal Code: _____ Phone: _____ Fax: _____
 Cell: _____ Email: _____

Installer's Number _____

Print Installer's Name _____

Installer's Signature _____

Project Location in the Beaver County:

 Street Address: _____ Tax Roll #: _____
 Legal Subdivision: Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____
 Subdivision Name: _____ Lot: _____ Block: _____ Plan: _____
 Directions: _____

TYPE OF OCCUPANCY:

-
- Residential
-
-
- Farm/Ranch
-
-
- Commercial
-
-
- Industrial
-
-
- Oilfield/Gas
-
-
- Institutional
-
-
- Mobile
-
-
- Manufactured

NUMBER OF OUTLETS:

 Furnace _____
 Water Heater _____
 Fireplace _____
 Dryer _____
 Unit Heater _____
 Range _____
 Room Heater _____
 Boilers _____
 Conversion _____
 Replacement Appliance _____
 Secondary Risers _____
 Barbeque _____
 Other _____

COMMERCIAL/INDUSTRIAL APPLICATION ONLY:

 Total BTU _____
 Name of Gas Supplier _____

DESCRIPTION OF WORK FOR ALL GAS PERMITS:

PROPANE INSTALLATION:

 No. of Tanks _____
 Tank Size _____
 Serial # _____
 Vaporizer
 Refill Centre
 Service Line from Tank to Building
 Temporary Heat
 Annual Permit

 Payment Type: Cash Cheque Interac M/C Visa

Permit Fee: \$ _____

+ SCC Levy*: \$ _____

Total Cost: \$ _____ Receipt #: _____

*\$4.50 or 4% of the permit fee maximum \$560.00

The Inspections Group Inc.

 300w, 14310 – 111 Avenue NW
 Edmonton AB T5M 3Z7

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

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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.