

Village of Clyde PO Box 190 Clyde, AB TOG 0P0 Phone: (780) 348-5356 (780) 348-5699 Fax:

the inspections groupinc.

www.villageofclyde.ca

## **BUILDING PERMIT APPLICATION FORM**

Development Permit Number:						
Application Date: DD / MMM / YYYY		Estimated Project Completion Date:DD/_MMM/_YYYY				
Applicant Type:   Homeowner  Contractor		Cost of Installation (Market Value Including Equipment) \$				
The Permit Holder hereby certifies that this installat of issue of the permit, (b) is suspended or abandon	ion will be completed in accordance with the Al	lberta Safety Co	odes Act. A permit may expire if the	ne undertaking to which it applie	es: (a) is not commenced within 90 days	
*2 Sets of plans / specifications & payment mus		oe considered v	men 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 "I hereby declare I am the owner of the profor compliance with the applicable Act and	emises in which the work will be conduc	eted, and resi	de or will reside on the prope	erty. I am doing the work m	yself, and assume responsibility	
Company Name:		Mailing	Address:			
City:	Prov: Postal Code:		Phone:	Fax:		
Cell:	Email:				_	
Contractor/Architect/Engineer Name			Signature			
Project Location in the Village of Clyde	:			Work: I not started	d ☐ in progress ☐ complete	
Street Address:			Tax	Roll #:		
Legal Subdivision: Part of:	Section:	_ Township:	Range	e: W	est of:	
Subdivision Name:		_ Lot:	Block:	Plan:		
Directions:						
BUILDING TYPE:	TYPE OF WORK:	BUIL	DING USE:	BUILDING AREA IN	SQ. FT.:	
☐ Dwelling Unit	☐ New Construction	□F	arm	Number of stories		
☐ Detached/Attached Garage	☐ Relocation		ingle/Multi Residential	Main area		
☐ Accessory Building	☐ Addition		Commercial	2 <sup>nd</sup> floor		
☐ Basement Development	☐ Renovation	_ II	ndustrial	Basement		
☐ Deck	☐ Demolition	_ I	nstitutional	Garage		
☐ Wood Burning Stove/Fireplace	☐ Change of Occupancy		il & Gas	Total Area		
Certification #	☐ Manufactured Home*		Other (specify)	Deck		
☐ Foundation Type	☐ Modular Home*					
	*CSA #	—		Basement developed	I at time of construction?	
Other (specify)				☐ Yes ☐ No		
	Development #					
Description of Work:						
Energy Compliance Method: ☐ Perfor *Manufactured Home – transportable in sin *Modular Home – assembled at site in sec	ngle or multiple sections; is ready for res	idential occu		tup.		
Payment Type:	☐ Interac ☐ M/C ☐ Visa					
			The Inspections Group Inc. 300W, 14310 – 111 Avenue NW			
Permit Fee: \$ + SCC Levy*: \$			Edmonton AB T5M 3Z7 Phone: (780) 454 5048 Toll Free: (866) 554 5048			
•			Fax: (780) 454 5222 Toll Free: (866) 454 5222 www.inspectionsgroup.com			
			www.inspectionsgroup.com questions@inspectionsgroup.com			
*\$4.50 or 4% of the permit fee maximum \$						