

County of Two Hills

PO Box 490 TWO HILLS AB TOB 4K0 Phone: (780) 657 3358 Fax: (780) 657 3504



www.thcounty.ab.ca

ELECTRICAL PERMIT APPLICATION FORM		
Application Date:	Estimated Proje	ect Completion Date:
Applicant Type: Homeowner Contract	cor Cost of Installation (Labour & Material	Including Equipment) \$_ may 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 per	leted in accordance with the Alberta Safety Codes Act. A permit lod of 120 days. An extension can be considered when applied for	may expire it the undertaking to which it applies: (a) is not commenced within 90 in writing prior to permit expiry date.
Owner Name: Mailing Address:		
City: Prov	: Postal Code: Pho	ne: 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: Pho	ne:Fax:
Cell:Ema	il:	
Master Electrician Number	Master Electrician Name	Master Electrician Signature
Project Location in the County of Two Hills:		
Street Address:		
Legal Subdivision: Part of: Sec	tion: Township:	Range: West of:
Subdivision Name:	Lot: Block	c: Plan:
Directions:		
BUILDING TYPE:	TYPE OF WORK:	SERVICE INFORMATION:
☐ Single / Multi Family Dwelling	☐ New Work	Does this installation Require a Service Connection
☐ Commercial	Addition	Yes □ No
☐ Residential	☐ Renovation / Alteration ☐ Installation of service (panel/meter/service upgrade)	SUPPLY SERVICE: Overhead Underground
☐ Industrial	Service Connection	Service Information: Amps:
☐ Institutional	☐ Improvements (A/C, hot tub, bsmt dev, etc.	Volts:
	☐ Temporary Service	Phase:
Square Feet:	☐ Alternative Energy – solar/wind	☐ ANNUAL PERMIT
	Other	
Description of Work:		
Payment Type: ☐ Cash ☐ Cheque ☐ Interac	☐ M/C ☐ Visa	The Inspections Group Inc.
Permit Fee: \$		300W, 14310 – 111 Avenue NW EDMONTON AB T5M 3Z7
+ SCC Levy*: \$		Phone: (780) 454 5048 Toll Free: (866) 554 5048 Fax: (780) 454 5222 Toll Free: (866) 454 5222
Total Cost: \$	Receipt #:	www.inspectionsgroup.com
*\$4.50 or 4% of the permit fee 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.