

Town of Vermilion 5021 49 Avenue Vermilion, AB T9X 1X1 Phone: 780 853 5358 Fax: 780 853 4910



www.vermilion.ca

pplication Date:		Estimated Project Completion Date:		
pplicant Type: Homeowner Contractor		Cost of Installation (Labor & Material including Equipment): cordance with the Alberta Safety Codes Act. A permit may expire if the undertaking to which it applies: (a) is not commenced within 90		
ys of issue of the permit, (b) is	suspended or abandoned for a period of 120 da	ays. An extension may be consid	dered when applied for in writing prior to permit	expiry date.
Our an Name		N/		
City:	Prov:	_ Postal Code:	Phone:	Fax:
Owner's Signature /	Declaration (Single Family Resid	Cell:	Email:	
	rner of the premises in which the work will be co		e on the property. I am doing the work myself,	and assume responsibility for compliance with the
Company Name:		Mai	ling Address:	
City:	Prov:	_ Postal Code:	Phone:	Fax:
Cell:	Email:			
Installer's Number	Print Installer's N	lame	Installer's Signature	
Project Location in t	he Town of Vermilion:			
Street Address:				
Legal Subdivision: Pa	art of: Section:	Townsh	iip: Range:	West of:
				Plan:
	ſ			
TYPE OF OCCUPANCY:	NUMBER OF FIXTURES:	WATER	R AND OR SEWER SERVICE:	PLUMBING DESCRIPTION OF WORK:
Residential	Kitchen Sinks		connect from Septic Connect to	
Farm/Ranch	Basins	Mur	nicipal Sewer	
Commercial	Laundry Toilets			
Industrial	Washers	Wat	Water and/or Sewer Services	
Oilfield/Gas	Bathtubs			
Institutional	Floor Drains	——— П Моł	bile Home/Factory Assembled	
	Grease Traps			
Mobile	Bidets/Water Fountains	Buil	ding Connection	ANNUAL PERMIT
Manufactured	Urinals Other			
Devenent Transfer				
Payment Type: Cash Cheque Interac M/C Visa			The Inspections Group Inc. 300W, 14310 – 111 Avenue NW	
Permit Fee: \$			Phone: (780) 454 5	
+ SCC Levy*: \$			Fax: (780) 454 5	
Total Cost: \$ Receipt #:			www.inspectionsgroup.com auestions@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.