

Total Cost: \$

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

**Town of Millet** 

P.O. Box 270 Millet AB T0C 1Z0 Phone: 780 387 4554 Fax: 780 387 4459



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|                                  | G   | SAS PERMIT   | APPLICA <sup>*</sup> | TION FORM   |                        |  |  |
|----------------------------------|---|--|----------------------|---|------------------------|--|--|
| Application Date:DD / MMM / YYYY |   | Estimated Project Completion Date: DD / MMM / YYYY |                      |   |                        |  |  |
|                                  | at this installation will be completed in   | accordance with the Alb                            | erta Safety Codes    |   | e undertaking to which | it applies: (a) is not commenced within 90 |  |
|                                  | pended or abandoned for a period of 1:  |  |                      |   |                        |  |  |
|                                  |   |  | -                    |   |                        | ax:  |  |
| Oily.                            |   |  |                      |   |                        | <u> </u>                                   |  |
|                                  | tion (Single Family Residential<br>ner of the premises in which the w<br>Act and Regulations" | Only)  |                      |   |                        | myself, and assume responsibility for      |  |
| Company Name:                    |   |  | _ Mailing Addr       | ess:  |                        |  |  |
| City:                            | Prov:   | Postal Code:                                       |                      | Phone:  | F                      | ax:  |  |
| Cell:                            | Email:  |  |                      |   |                        |  |  |
| Installer's Number               | Print Ir  | nstaller's Name                                    | Installer's Signa    |   | Installer's Signature  |  |  |
| Project Location in the Town     | n of Millet:  |  |                      |   |                        |  |  |
| Street Address:                  | eet Address:  |  |                      | Tax Roll #:   |                        |  |  |
| Legal Subdivision: Part of:      | Section:  |  | Township:            | Range: _  |                        | West of:                                   |  |
| Subdivision Name:                |   | I  | Lot:                 | Block:  | Plan:                  |  |  |
| Directions:                      |   |  |                      |   |                        |  |  |
| TYPE OF OCCUPANCY:               | NUMBER OF OUTLETS:  |  | COMMERCIA            | AL/INDUSTRIAL APPLIC  | ATION ONLY:            | PROPANE INSTALLATION:                      |  |
| Residential                      | Furnace   |  | Total                |   | BTU                    | No. of Tanks                               |  |
| ☐ Farm/Ranch                     | Water Heater  |  |                      |   |                        | Tank Size                                  |  |
| ☐ Commercial                     | Fireplace   |  | Name of Gas          | Name of Gas Supplier  |                        | Serial #                                   |  |
| ☐ Industrial                     | Dryer Unit Heater   |  | DESCRIPTION          | ON OF WORK FOR ALL (  | SAS DEDMITS:           |  |  |
| ☐ Oilfield/Gas                   | Range   |  | DESCRIPTION          | NOT WORK FOR ALL C  | JAS FERMITS.           | ☐ Vaporizer                                |  |
| ☐ Institutional                  | Room Heater   |  | -                    |   |                        | Refill Centre                              |  |
| ☐ Mobile                         | Boilers Conversion  | <del></del>  |                      |   |                        | ☐ Service Line from Tank to Building       |  |
| _                                | Replacement Appliance   |  | -                    |   |                        | ☐ Temporary Heat                           |  |
| ☐ Manufactured                   | Secondary Risers  |  | -                    |   | _                      |  |  |
|                                  | Barbeque  |  | -                    |   |                        | ☐ Annual Permit                            |  |
|                                  | Other   |  |                      |   |                        |  |  |
| Payment Type:                    | ☐ Cheque ☐ Interac  | ☐ M/C ☐ Vis  | sa                   |   |                        |  |  |
| Permit Fee: \$                   |   |  |                      | The Inspections Group Inc. 300W, 14310 – 111 Avenue NW  |                        |  |  |
| + SCC Levy*: \$                  |   |  |                      | Edmonton AB T5M 3Z7 Phone: (780) 454 5048 Toll Free: (866) 554 5048 Fax: (780) 454 5222 Toll Free: (866) 454 5222 |                        |  |  |

REMIT PAYMENT AND APPLICATION TO THE INSPECTIONS GROUP INC.

Receipt #:\_

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.