

## **Summer Village of South View**

PO Box 8

Alberta Beach AB T0A 0A0 Phone: (587) 873 5765 (780) 967 0431



www.summervillageofsouthview.com

	PLUMBING PE	RMIT AP	PLICATION FORM	
pplication Date:			Estimated Project Completion Date:	
oplicant Type:  Homeo	wner Contractor Cost that this installation will be completed in accordance with the A	t of Installatio	n (Labor & Material including Equipment):	which it applies (a) is not some and within 00
ys of issue of the permit, (b) is s	suspended or abandoned for a period of 120 days. An extension	n may be conside	ered when applied for in writing prior to permit expi	ry date.
City:	Prov: Postal Cod	de:	Phone:	Fax:
Owner's Signature / I	Declaration (Single Family Residential Only)	Cell:	Email:	
"I hereby declare I am the own applicable Act and Regulation	ner of the premises in which the work will be conducted, and res	side or will reside	on the property. I am doing the work myself, and	assume responsibility for compliance with the
applicable / lot alia / tegalation				
Company Name:		Maili	ng Address:	
City:	Prov:Postal Cod	de:	Phone:	Fax:
Cell:	Email:			
Installer's Number Print Installer's Name Installer's Signature				
Project Location in the	ne Summer Village of South View:			
Street Address:				
Legal Subdivision: Pa	rt of: Section:	Townshi	p: Range:	West of:
Subdivision Name:		Lot:	Block: Plar	າ:
Directions:				
TYPE OF OCCUPANCY:	NUMBER OF FIXTURES:	WATER	AND OR SEWER SERVICE:	PLUMBING DESCRIPTION OF WORK:
☐ Residential	Kitchen Sinks	☐ Disco	onnect from Septic Connect to	
☐ Farm/Ranch	Basins	Muni	icipal Sewer	
☐ Fam/Ranch	Showers	Widin	loipai oewei	
☐ Commercial	Laundry			
☐ Industrial	Toilets Washers	☐ Wate	er and/or Sewer Services	
☐ Oilfield/Gas	Bathtubs			
_	Floor Drains	□ Mah:	ilo Homo/Eactory Assambled	
☐ Institutional	Grease Traps	─────────────────────────────────────		
☐ Mobile	Bidets/Water Fountains	Building Connection		☐ ANNUAL PERMIT
☐ Manufactured	Urinals Other			
			T	
	ash ☐ Cheque ☐ Interac ☐ M/C ☐ Visa		300W, 14310	tions Group Inc. ) – 111 Avenue NW
Permit Fee: \$			EDMONT( Phone: (780) 454 5048	ON AB T5M 3Z7 Toll Free: (866) 554 5048
+ SCC Levy*: \$			Fax: (780) 454 5222	Toll Free: (866) 454 5222
Total Cost: \$	Receipt #:		· ·	ctionsgroup.com spectionsgroup.com
*\$4.50 or 4% of the permi	t fee maximum \$560.00		questions@ins	specialisgioup.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.