

**BUILDING PERMIT APPLICATION FORM**

Development Permit No.: \_\_\_\_\_ Other Permits Required (under separate application):  Electrical  Plumbing  Gas  PSDS  
 New Home Warranty No. (if applicable): \_\_\_\_\_  
 Application Date (mmm/dd/yyyy): \_\_\_\_\_ Estimated Project Completion Date (mmm/dd/yyyy): \_\_\_\_\_  
 Permit Applicant:  Owner  Contractor Value of Installation (labour and material): \$ \_\_\_\_\_

Owner Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Cell: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Project Location: Municipality: \_\_\_\_\_ Subdivision Name: \_\_\_\_\_ Tax Roll No.: \_\_\_\_\_  
 Street/Rural Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_ LSD: \_\_\_\_\_ Quarter: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ West of: \_\_\_\_\_  
 Directions: \_\_\_\_\_

Description of Work:  Work has not started  Work is in progress  Work is complete

TYPE OF OCCUPANCY	TYPE OF WORK		BUILDING AREA
<input type="checkbox"/> Single Residential <input type="checkbox"/> Multi-family <input type="checkbox"/> Farm/Ranch <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Manufactured/Mobile Home <input type="checkbox"/> Oil and Gas <input type="checkbox"/> Other: _____	<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Renovation <input type="checkbox"/> Relocation/Ready to Move <input type="checkbox"/> Change of Occupancy/Use <input type="checkbox"/> Accessory Building <input type="checkbox"/> Shed <input type="checkbox"/> Deck <input type="checkbox"/> Secondary Suite <input type="checkbox"/> Nanny Suite <input type="checkbox"/> Basement Development <input type="checkbox"/> Demolition <input type="checkbox"/> Swimming Pool/Hot Tub	<input type="checkbox"/> Garage <input type="checkbox"/> Detached <input type="checkbox"/> Attached <input type="checkbox"/> Temporary Structure Removal Date: _____ <input type="checkbox"/> Foundation Type: _____ <input type="checkbox"/> Manufactured/Mobile Home CSA No.: _____ AMA No.: _____ <input type="checkbox"/> Wood Burning/Pellet Stove/Fireplace Certification No.: _____ <input type="checkbox"/> Other: _____	<input type="checkbox"/> ft <sup>2</sup> <input type="checkbox"/> m <sup>2</sup> Main Area: _____ 2 <sup>nd</sup> Floor Area: _____ Basement Area: _____ Developed: <input type="checkbox"/> Yes <input type="checkbox"/> No Total Developed Area: _____ No. of Storeys: _____ Garage: _____ Deck: _____ Shed: _____

**FOIP Notification:** Personal information collected on this form is collected under the authority of section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act. It is used for processing permit applications, issuing permits, safety codes compliance monitoring, verification and program evaluation. The name of the permit holder and nature of the permit may be included on reports provided to a municipality or made available to the public as required or allowed by legislation. Questions about this collection may be directed to ASCA Coordinators at 1-888-413-0099 or at Suite 500, 10405 Jasper Avenue, Edmonton, AB T5J 3N4.

Permit Applicant's Name (print) \_\_\_\_\_ Permit Applicant's Signature \_\_\_\_\_ Homeowner's Signature (homeowner permit only) \_\_\_\_\_  
 Homeowner Declaration: By signing this I hereby certify that I own/will own and occupy this dwelling.

Office Use Only		
Permit Fee: \$ _____	SCC Levy: _____	Issuing Officer's Name: _____
Total Cost: \$ _____	(\$4.50 or 4% of the permit fee maximum \$560.00)	Issuing Officer's Signature: _____
	Receipt No.: _____	Designation No.: _____
<input type="checkbox"/> Cash <input type="checkbox"/> Debit <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card (attach signed credit card authorization form)		Permit Issue Date (mmm/dd/yyyy): _____