

**Fishing Lake Métis Settlement**

General Delivery
 Sputinow, AB T0A 3G0
 Phone: (780) 943 2202
 Fax: (780) 943 2575
 www.fishinglakems.ca

The Inspections Group Inc.

#110, 4910 50 Avenue
 Cold Lake AB T9M 0G1
 Phone: (780) 594 4301 / (888) 853 6411
 Fax: (780) 594 3720 / (844) 750 3721
 www.inspectionsgroup.com

ELECTRICAL PERMIT APPLICATION FORM

Application Date: _____

Estimated Project Completion Date: _____

Applicant Type: Homeowner Contractor

Cost of Installation (Labour & Material) \$ _____

The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act. A permit 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 period of 120 days. An extension can be considered when applied for in writing prior to permit expiry date.

Owner Name: _____ Mailing Address: _____
 City: _____ Prov: _____ Postal Code: _____
 Cell: _____ Phone: _____ Fax: _____
 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"

Contractor Name: _____ Business Name: _____
 Mailing Address: _____ City: _____ Prov: _____ Postal Code: _____
 Phone: _____ Fax: _____ Cell: _____
 Email: _____

 Master Electrician Number Master Electrician Name Master Electrician Signature

Project Location in The Fishing Lake Métis Settlement:

Street Address: _____
 Legal Subdivision: Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____
 Subdivision Name: _____ Lot: _____ Block: _____ Plan: _____
 Directions / House Number: _____

BUILDING TYPE:

- Single / Multi Family Dwelling
 Commercial
 Residential
 Industrial
 Institutional
 Square Feet: _____

TYPE OF WORK:

- New Work
 Renovation
 Connection
 Temporary Service
 Other

SERVICE INFORMATION:

- Does this installation Require a Service Connection
 Yes No
SUPPLY SERVICE: Overhead Underground
 Service Information: Amps: _____
 Volts: _____
 Phase: _____

Description of Work: _____

Payment Type:

- Cash Cheque C/C On Account Interac

Permit Fee: \$ _____

+ SCC Levy*: \$ _____

+ Admin Fee: \$ _____

Total Cost: \$ _____ Receipt #: _____

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

TIGI OFFICE USE ONLY

Issuing Officer's Name: _____

Issuing Officer's Signature: _____

Designation Number: _____

Permit Issue Date: _____

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.