

**BUILDING PERMIT APPLICATION FORM**

**Application Date** (mmm/dd/yyyy): \_\_\_\_\_ **Other Permits Required:**  Electrical  Plumbing  Gas  Private Sewage  Not Applicable  
(under separate application)

Development Permit No. (only if applicable): \_\_\_\_\_

**New Home Warranty No.** (if applicable): \_\_\_\_\_ **Bulder License ID No.** (if applicable): \_\_\_\_\_

Estimated Start Date (mmm/dd/yyyy): \_\_\_\_\_ Estimated Project Completion Date (mmm/dd/yyyy): \_\_\_\_\_

Permit Applicant:  Owner  Contractor Value of Work (labour and materials): \$ \_\_\_\_\_

**Owner Name (please print):** \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/Town/Village: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Contracting Company Name (please print):** \_\_\_\_\_ **Contact Name (please print):** \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/Town/Village: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Project Location (Municipality):** \_\_\_\_\_ **Subdivision/Hamlet Name:** \_\_\_\_\_ **Tax Roll No.:** \_\_\_\_\_

Street/Rural Address: \_\_\_\_\_ Unit: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_ LSD: \_\_\_\_\_ Quarter: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ West of: \_\_\_\_\_

Directions: \_\_\_\_\_

**Description of Work** (please provide a *complete* and *detailed* description of the work to be completed including all applicable drawings/documents):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Work has not started  Work is in progress  Work is complete

TYPE OF OCCUPANCY	TYPE OF WORK		BUILDING AREA
<input type="checkbox"/> Single Family	<input type="checkbox"/> New	<input type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage	<input type="checkbox"/> feet <sup>2</sup> <input type="checkbox"/> meters <sup>2</sup>
<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Addition	<input type="checkbox"/> Shed <input type="checkbox"/> Shop	Ground Floor Area: _____
<input type="checkbox"/> Commercial	<input type="checkbox"/> Renovation	<input type="checkbox"/> Manufactured/Mobile Home	2nd Floor Area: _____
<input type="checkbox"/> Industrial	<input type="checkbox"/> Relocation/Ready to Move	CSA No.: _____ Year: _____	Basement Floor Area: _____
<input type="checkbox"/> Institutional	<input type="checkbox"/> Change of Occupancy/Use	AMA No.: _____	Developed: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Relocatable Industrial	<input type="checkbox"/> Temporary Structure	<input type="checkbox"/> Solid Fuel/Pellet Stove/Fireplace	Garage: _____
<input type="checkbox"/> Other: _____	Removal Date: _____	<input type="checkbox"/> Swimming Pool/Hot Tub	Deck: _____
	<input type="checkbox"/> Secondary Suite	<input type="checkbox"/> Deck	Other: _____
	<input type="checkbox"/> Basement Development	<input type="checkbox"/> Other: _____	<b>Total Developed Area:</b> _____
	<input type="checkbox"/> Demolition		Undeveloped Area: _____
			No. of Storeys: _____

**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 (please print): \_\_\_\_\_ Permit Applicant's Signature: \_\_\_\_\_

Homeowner's signature (homeowner permit only) Homeowner Declaration: By signing this application I hereby certify that I own/will own and occupy this dwelling

**OFFICE USE ONLY**

Permit Fee: \$ \_\_\_\_\_ Travel Fee: \$ \_\_\_\_\_ SCO/Permit Issuers Name (please print): \_\_\_\_\_

SCC Levy: \$ \_\_\_\_\_ (\$4.50 or 4% of the permit fee maximum \$560.00) SCO/Permit Issuers Signature: \_\_\_\_\_

Total Cost: \$ \_\_\_\_\_ Designation No.: \_\_\_\_\_

Cash  Cheque  Debit Receipt No.: \_\_\_\_\_ Permit Issue Date: \_\_\_\_\_ (mmm/dd/yyyy)

Credit Card (attach signed credit card authorization form)  Invoiced