

[received date stamp]

[agency file no.]

[eSITE permit no.]

ELECTRICAL PERMIT APPLICATION

Application Date (mmm/dd/yyyy):	Other Permits Requ	ired: □ Building □ Gas □ Plumbing □ Private Sewage □ Not Applicable	
Development Permit No. (if applicable):	(under separate applicati Building F	on) Permit No. (if applicable):	
Estimated Start Data (1111)		Estimated Project Completion Data (11/1)	
Permit Applicant: Owner Contractor			
Owner Name (please print):			
		Province: Postal Code:	
Email:	Owner's Phone #:	Fax:	
Contracting Company Name (please print):		Contact Name (please print):	
Mailing Address:	City/Town/Village:	Province: Postal Code:	
Email:	Contact's Phone #:	Fax:	
Project Location			
(Municipality):	Subdivision/Hamlet Name:	Tax Roll No.:	
Street/Rural Address:		Unit:	
Lot: Block: Plan:	LSD: Quarter: Se	ction: Township: Range: West of:	
Directions:			
	I detailed description of the work to be completed including		
[[
	WORK MUST BE INSPECTED BEFORE	COVERING	
TYPE OF OCCUPANCY		COVERING SERVICE AND INSTALLATION AREA	
	WORK MUST BE INSPECTED BEFORE TYPE OF WORK	COVERING SERVICE AND INSTALLATION AREA	
TYPE OF OCCUPANCY	WORK MUST BE INSPECTED BEFORE TYPE OF WORK Addition Renovation (Interior)	COVERING SERVICE AND INSTALLATION AREA Overhead Underground feet ² me Ground Floor:	
TYPE OF OCCUPANCY	WORK MUST BE INSPECTED BEFORE TYPE OF WORK Addition Renovation (Interior) Connection Only	COVERING SERVICE AND INSTALLATION AREA Coverhead Coverhe	
TYPE OF OCCUPANCY Single Family Multi-family Farm/Ranch Commercial Industrial	WORK MUST BE INSPECTED BEFORE TYPE OF WORK Addition Renovation (Interior) Connection Only Service	COVERING SERVICE AND INSTALLATION AREA Overhead Underground feet ² me Ground Floor: Amps: 2 nd Floor (loft / mezzanine): Volts: Developed Basement: Phase:	
TYPE OF OCCUPANCY Single Family Multi-family Farm/Ranch Commercial Industrial Institutional	WORK MUST BE INSPECTED BEFORE TYPE OF WORK Addition Renovation (Interior) Connection Only Service Temporary Service	COVERING SERVICE AND INSTALLATION AREA Overhead Overhead Underground feet ² me Ground Floor: Amps: 2nd Floor (loft / mezzanine): Volts: Phase: Garage/Shop:	
TYPE OF OCCUPANCY Single Family Multi-family Farm/Ranch Commercial Industrial	WORK MUST BE INSPECTED BEFORE TYPE OF WORK Addition Renovation (Interior) Connection Only Service	COVERING SERVICE AND INSTALLATION AREA Overhead Overhead Underground feet ² me Ground Floor: Amps: 2nd Floor (loft / mezzanine): Volts: Carage/Shop: Carage/Shop: Cattached	
TYPE OF OCCUPANCY Single Family Multi-family Farm/Ranch Commercial Industrial Institutional Manufactured/Mobile Home Irrigation Pivots Pump Jacks	WORK MUST BE INSPECTED BEFORE TYPE OF WORK Addition Renovation (Interior) Connection Only Service Temporary Service Annual Permit	COVERING SERVICE AND INSTALLATION AREA Overhead Overhead Underground feet ² me Ground Floor: Amps: 2nd Floor (loft / mezzanine): Volts: Phase: Garage/Shop:	
TYPE OF OCCUPANCY Single Family Multi-family Farm/Ranch Commercial Industrial Institutional Manufactured/Mobile Home Irrigation Pivots Pump Jacks Skid Units	WORK MUST BE INSPECTED BEFORE TYPE OF WORK Addition Renovation (Interior) Connection Only Service Temporary Service Annual Permit Alternate Energy Supply	COVERING SERVICE AND INSTALLATION AREA Overhead Overhead Underground feet ² me Ground Floor: Amps: 2nd Floor (loft / mezzanine): Volts: Developed Basement: Phase: Garage/Shop: Cattached Other:	
TYPE OF OCCUPANCY Single Family Multi-family Farm/Ranch Commercial Industrial Institutional Manufactured/Mobile Home Irrigation Pivots Pump Jacks Skid Units Other	WORK MUST BE INSPECTED BEFORE TYPE OF WORK Addition Renovation (Interior) Connection Only Service Temporary Service Annual Permit Alternate Energy Supply Solar U Wind Other	COVERING SERVICE AND INSTALLATION AREA Overhead Overhead Underground feet ² me Ground Floor: Amps: 2 nd Floor (loft / mezzanine): Volts: 2 nd Floor (loft / mezzanine): Colts: Col	
TYPE OF OCCUPANCY Single Family Multi-family Farm/Ranch Commercial Industrial Institutional Manufactured/Mobile Home Irrigation Pivots Pump Jacks Skid Units Other	WORK MUST BE INSPECTED BEFORE	COVERING SERVICE AND INSTALLATION AREA Overhead Overhead Underground feet ² me Ground Floor: Amps: 2nd Floor (loft / mezzanine): Volts: Developed Basement: Phase: Garage/Shop: Cattached Other:	
TYPE OF OCCUPANCY Single Family Multi-family Farm/Ranch Commercial Industrial Institutional Manufactured/Mobile Home Irrigation Pivots Pump Jacks Skid Units Other FOIP Notification: Personal information collected on this form applications, issuing permits, safety codes compliance monito municipality or made available to the public as required or allow Edmonton, AB T5J 3N4.	WORK MUST BE INSPECTED BEFORE	COVERING	
TYPE OF OCCUPANCY Single Family Multi-family Farm/Ranch Commercial Industrial Institutional Manufactured/Mobile Home Irrigation Pivots Pump Jacks Skid Units Other FOIP Notification: Personal information collected on this form applications, issuing permits, safety codes compliance monito municipality or made available to the public as required or allow Edmonton, AB T5J 3N4. Master Electrician's Name (please print)	WORK MUST BE INSPECTED BEFORE	COVERING SERVICE AND INSTALLATION AREA Overhead Underground feet ² me Ground Floor:	
TYPE OF OCCUPANCY Single Family Multi-family Farm/Ranch Commercial Industrial Institutional Manufactured/Mobile Home Irrigation Pivots Pump Jacks Skid Units Other FOIP Notification: Personal information collected on this form applications, issuing permits, safety codes compliance monito municipality or made available to the public as required or allow Edmonton, AB T5J 3N4. Waster Electrician's Name (please print) Homeowner 's Signature (homeowner permit only) Homeowner	WORK MUST BE INSPECTED BEFORE TYPE OF WORK Addition Renovation (Interior) Connection Only Service Temporary Service Annual Permit Alternate Energy Supply Solar Other Other Certification and program evaluation. The name of the permix wed by legislation. Questions about this collection may be directed Certification No. er Declaration: By signing this application I hereby certify th	COVERING SERVICE AND INSTALLATION AREA Coverhead Cov	
TYPE OF OCCUPANCY Single Family Multi-family Farm/Ranch Commercial Industrial Institutional Manufactured/Mobile Home Irrigation Pivots Pump Jacks Skid Units Other FOIP Notification: Personal information collected on this form applications, issuing permits, safety codes compliance monito municipality or made available to the public as required or allow Edmonton, AB T5J 3N4. Master Electrician's Name (please print) Homeowner 's Signature (homeowner permit only) Homeowner	WORK MUST BE INSPECTED BEFORE	COVERING	
TYPE OF OCCUPANCY Single Family Multi-family Farm/Ranch Commercial Industrial Industrial Institutional Manufactured/Mobile Home Irrigation Pivots Pump Jacks Skid Units Other FOIP Notification: Personal information collected on this form applications, issuing permits, safety codes compliance monito municipality or made available to the public as required or allow Edmonton, AB T5J 3N4. Master Electrician's Name (please print) Homeowner 's Signature (homeowner permit only) Homeowner	WORK MUST BE INSPECTED BEFORE Image: Type of work Image: Addition Renovation (Interior) Connection Only Service Temporary Service Annual Permit Alternate Energy Supply Solar Other Other Certification and program evaluation. The name of the permixed by legislation. Questions about this collection may be directed Certification No. er Declaration: By signing this application I hereby certify the OFFICE USE ONLY Fee: \$	COVERING	

□ Cash □ Cheque

The Inspections Group Inc. Ph.: 1-780-454-5048 or 1-866-554-5048 Fax: 1-866-454-5222 Email: questions@inspectionsgroup.com

Debit Receipt No.:

□ Credit Card (attach signed credit card authorization form) □ Invoiced

Permit Issue Date:

Web: www.inspectionsgroup.com

(mmm/dd/yyyy)