Town of Elk Point
PO Box 448
ELK POINT, AB T0A 1A0
Phone: (780) 724 3810
Fax: (780) 724 2762

www.elkpoint.ca

BUILDING PERMIT APPLICATION FORM

Application Date: DD / MMM / YYYY **Estimated Project Completion Date:** DD / MMM / YYYY

Applicant Type: ☐ **Homeowner** ☐ **Contractor** **Cost of Installation (Market Value Including Equipment) $**

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.
****2 Sets of plans / specifications & payment must accompany this application****

Owner Name: Mailing Address:

City: Prov: Postal Code: Phone: Fax:

Cell: 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"

Company Name: Mailing Address:

City: Prov: Postal Code: Phone: Fax:

Cell: Email:

Contractor/Architect/Engineer Name Signature

Project Location in the Town of Elk Point: **Work:** ☐ not started ☐ in progress ☐ complete

Street Address: Tax Roll #:

Legal Subdivision: Part of: Section: Township: Range: West of:

Subdivision Name: Lot: Block: Plan:

Directions:

BUILDING TYPE:	**TYPE OF WORK:**	**BUILDING USE:**	**BUILDING AREA IN SQ. FT.:**
☐ Dwelling Unit	☐ New Construction	☐ Farm	Number of stories
☐ Detached/Attached Garage	☐ Relocation	☐ Single/Multi Residential	Main area
☐ Accessory Building	☐ Addition	☐ Commercial	2nd floor
☐ Basement Development	☐ Renovation	☐ Industrial	Basement
☐ Deck	☐ Demolition	☐ Institutional	Garage
☐ Wood Burning Stove/Fireplace	☐ Change of Occupancy	☐ Oil & Gas	Total Area
Certification #	☐ Manufactured Home*	☐ Other (specify)	Deck
☐ Foundation Type	☐ Modular Home*		
	*CSA #		Basement developed at time of construction?
☐ Other (specify)	Development #		☐ Yes ☐ No

Description of Work:
Energy Compliance Method: ☐ **Performance** ☐ **Trade-Off** ☐ **Prescriptive**
*Manufactured Home – transportable in single or multiple sections; is ready for residential occupancy upon completion of setup.
*Modular Home – assembled at site in sections; sections have no chassis, running gear nor its own wheels.

Payment Type: ☐ Cash ☐ Cheque ☐ Interac ☐ M/C ☐ Visa

Permit Fee: $

+ SCC Levy*: $

Total Cost: $ Receipt #:

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

The Inspections Group Inc.
#110, 4910 50 Avenue
COLD LAKE AB T9M 0G1
Phone: (780) 594 4301 / (888) 853 6411
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www.inspectionsgroup.com
questions@inspectionsgroup.com

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.