

Town of St. Paul Box 1480 5101 - 50 Street St. Paul, AB TOA 3A0 Phone: (780) 645 4481 Fax: (780) 645 5076



www.town.stpaul.ab.ca

## **BUILDING PERMIT APPLICATION FORM**

plication Date:		Estimated Project Completion Date:		
plicant Type: 🗌 Homeowner 🗌 C		-	ding Equipment) \$	
	ned for a period of 120 days. An extension can be		e undertaking to which it applies: (a) is not commenced within 90 d ermit expiry date.	
Owner Name:		Mailing Address:		
City:	Prov: Postal Code:	Phone:	Fax:	
		Cell:	Email:	
	gle Family Residential Only) premises in which the work will be conduc		perty. I am doing the work myself, and assume responsib	
for compliance with the applicable Act an Company Name:		Mailing Address:		
			Fax:	
Cell:	Email:			
Contractor/Architect/E	Engineer Name		Signature	
Project Location in the Town St. Paul	:		Work: I not started I in progress I comp	
Street Address:		Ta	Tax Roll #:	
Legal Subdivision. Part of	Section <sup>.</sup>	Township <sup>.</sup> Rang	e: West of:	
			Plan:	
		_ LOI: BIOCK:	Plan:	
Directions:	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		Commercial	2 <sup>nd</sup> floor	
Basement Development		Industrial	Basement	
			Garage	
Wood Burning Stove/Fireplace	Change of Occupancy	Oil & Gas	Total Area	
Certification #		Other (specify)	Deck	
Foundation Type	Modular Home*		-	
	*CSA #	-	Basement developed at time of construction?	
Other (specify)			_ Yes No	
	Development #			
Description of Work: Energy Compliance Method:	formance 🔲 Trade-Off 🗌 Prescriptive			
*Manufactured Home - transportable in	single or multiple sections; is ready for resident constraints, sections have no chassis, running	idential occupancy upon completion of se	etup.	
	ie Interac M/C Visa	gear nor its own wheels.		
			The Inspections Group Inc.	
Permit Fee: \$			110, 4910 – 50 Avenue Cold Lake AB T9M 0G1	
+ SCC Levy*: \$			780) 594 4301 Toll Free: (888) 853 6411 80) 594 3720 Toll Free: (844) 750 3721	
Total Cost: \$	Receipt #:		www.inspectionsgroup.com	
* \$4 50 or 40/ of the '	- #FCO 00		questions@inspectionsgroup.com	
*\$4.50 or 4% of the permit fee maximum		APPLICATION TO THE INSPECTIONS GROU		

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.