



Smoky Lake County
 PO Box 310
 SMOKY LAKE AB T0A 3C0
 Phone: 780 656 3730
 www.smokylakecounty.ab.ca



ELECTRICAL PERMIT APPLICATION FORM

Application Date: _____ **Estimated Project Completion Date:** _____

Applicant Type: Homeowner Contractor **Cost of Installation (Labour & Material 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.

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: _____

_____ Master Electrician Number _____ Master Electrician Name _____ Master Electrician Signature _____

Project Location in Smoky Lake County:
 Street Address: _____
 Legal Subdivision: Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____
 Subdivision Name: _____ Lot: _____ Block: _____ Plan: _____
 Directions: _____

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

TYPE OF WORK:
 New Work
 Addition
 Renovation / Alteration
 Installation of service (panel/meter/service upgrade)
 Service Connection
 Improvements (A/C, hot tub, bsmt dev, etc.)
 Temporary Service
 Alternative Energy – solar/wind
 Other

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

Description of Work: _____

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.
 300W, 14310 – 111 Avenue NW
 EDMONTON AB T5M 3Z7
 Phone: (780) 454 5048 Toll Free: (866) 554 5048
 Fax: (780) 454 5222 Toll Free: (866) 454 5222
 www.inspectionsgroup.com
 questions@inspectionsgroup.com

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.