

## **Summer Village of Sundance Beach**

RR# 1 South, Site 1, PO Box 28 Thorsby, AB T0C 2P0 Phone: (780) 389 4409



www.sundancebeach.ca

PLUMBING PERMIT APPLICATION FORM					
pplication Date:			Estimated Project Completion Date:		
Applicant Type: Homeowner Contractor Cost of Installation (Labor & Material including Equipment):  he 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 n				which it applies: (a) is not commenced within 90	
	suspended or abandoned for a period of 120 days. An ex				
Owner Name: Mailing Address:					
City:	Prov: Posta				
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 Regulation	<u>s".</u>				
Company Name:		Maili	ng Address:		
City:	Prov: Posta	al Code:	Phone:	Fax:	
Cell:	Email:				
Installer's Number Print Installer's Name Installer's Signature				Signature	
Project Location in the Summer Village of Sundance Beach:					
Street Address:					
Legal Subdivision: Part of: Section: Township: Range: West of:					
Subdivision Name:         Lot:         Block:         Plan:					
Directions:					
TYPE OF OCCUPANCY:	NUMBER OF FIXTURES:	WATER	AND OR SEWER SERVICE:	PLUMBING DESCRIPTION OF WORK:	
Residential	Kitchen Sinks	Disco	onnect from Septic Connect to		
☐ Farm/Ranch	Basins	Muni	icipal Sewer		
☐ Commercial	Showers Laundry	-			
	Toilets		on and/an Causan Camiaaa		
☐ Industrial	Washers	· ∐ Wate	er and/or Sewer Services		
☐ Oilfield/Gas	Bathtubs	-			
☐ Institutional			ile Home/Factory Assembled		
☐ Mobile	Grease Traps Bidets/Water Fountains		ling Connection		
	Urinals			☐ ANNUAL PERMIT	
☐ Manufactured	Other				
Payment Type:					
Permit Fee: \$			300W, 14310 EDMONTO	) – 111 Avenue NW ON AB T5M 3Z7	
+ SCC Levy*: \$			Phone: (780) 454 5048 Fax: (780) 454 5222	Toll Free: (866) 554 5048 Toll Free: (866) 454 5222	
Total Cost: \$	Receipt #:		www.inspe	ctionsgroup.com	
*\$4.50 or 4% of the permi	t fee maximum \$560.00		questions@in:	spectionsgroup.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.