



Summer Village of Island Lake

PO Box 568
BRUDERHEIM AB T0B 0S0
Phone: 780 237 2204

www.islandlake.ca



PLUMBING PERMIT APPLICATION FORM

Application Date: DD / MMM / YYYY

Estimated Project Completion Date: DD / MMM / YYYY

Applicant Type: Homeowner Contractor

Cost of Installation (Labor & 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: _____

Installer's Number _____ Print Installer's Name _____ Installer's Signature _____

Project Location in the Summer Village of Island Lake:

Street Address: _____ Tax Roll #: _____

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:
<input type="checkbox"/> Residential	Kitchen Sinks _____	<input type="checkbox"/> Disconnect from Septic Connect to	_____ _____ _____ _____ _____ <input type="checkbox"/> Annual Permit
<input type="checkbox"/> Farm/Ranch	Basins _____	Municipal Sewer	
<input type="checkbox"/> Commercial	Showers _____	<input type="checkbox"/> Water and/or Sewer Services	
<input type="checkbox"/> Industrial	Laundry _____	<input type="checkbox"/> Mobile Home/Factory Assembled	
<input type="checkbox"/> Oilfield/Gas	Toilets _____	Building Connection	
<input type="checkbox"/> Institutional	Washers _____		
<input type="checkbox"/> Mobile	Bathtubs _____		
<input type="checkbox"/> Manufactured	Floor Drains _____		
	Grease Traps _____		
	Bidets/Water Fountains _____		
	Urinals _____		
	Other _____		

Payment Type: Cash Cheque Interac M/C Visa

Permit Fee: \$ _____

+ SCC Levy*: \$ _____

Total Cost: \$ _____ Receipt #: _____

The Inspections Group Inc.
 300W, 14310 – 111 Avenue NW
 Edmonton AB T5M 3Z7
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*\$4.50 or 4% of the permit fee maximum \$560.00