

## **Town of Vegreville**

PO Box 640 VEGREVILLE AB T9C 1R7 Phone: (780) 632 6479

(780) 632 6856



www.vegreville.com

EL	ECTRICAL PERMIT AP	PPLICATION FORM	
Development Permit Number:		File Number:	
Application Date:	Estimate		
Applicant Type: Homeowner Contractor The Permit Holder hereby certifies that this installation will be completed by so fissue of the permit, (b) is suspended or abandoned for a perior		abour & Material Including Equipment) \$	
Owner Name:	Mailing	g Address:	
City: Prov:	Postal Code:	Phone: Fax:	
Owner's Signature / Declaration (Single Family "I hereby declare I am the owner of the premises in which the work Act and Regulations"	Residential Only)	Cell:Email: on the property. I am doing the work myself, and assume responsibility for compliance with the applicable	
Company Name:	Mailing	g Address:	
City:Prov:	Postal Code:	Phone:Fax:	
Cell:Email	:		
Master Electrician Number	Master Electrician Number Master Electrician Name Master Electrician Signature		
Project Location in the Town of Vegreville:		· · · · · · · · · · · · · · · · · · ·	
Street Address:			
Legal Subdivision: Part of: Secti	on: Township:	: Range: West of:	
Subdivision Name:	Lot:	Block: Plan:	
Directions:			
BUILDING TYPE:	TYPE OF WORK:	SERVICE INFORMATION:	
☐ Single / Multi Family Dwelling	☐ New Work	Does this installation Require a Service Connection	
☐ Commercial	Addition	☐ Yes ☐ No	
	Renovation / Alteration Installation of service (pan-	SUPPLY SERVICE: Overhead Underground	
Residential	Installation of service (pan- upgrade)	Service Information: Amps:	
☐ Industrial	☐ Service Connection	The state of the	
☐ Institutional	Improvements (A/C, hot tub, be	smt dev, etc. Volts:	
Saucra Foot	☐ Temporary Service ☐ Alternative Energy – solar/wind	Phase:	
Square Feet:	☐ Other	□ ANNUAL PERMIT	
Description of Work:	l	<b>I</b>	
Payment Type:	☐ M/C ☐ Visa	The Ingressions Craws Inc	
Permit Fee: \$		The Inspections Group Inc. 300W, 14310 – 111 Avenue NW EDMONTON AB T5M 327	
+ SCC Levy*: \$		EDMONTON AB 15M 327  Phone: (780) 454 5048 Toll Free: (866) 554 5048  Fax: (780) 454 5222 Toll Free: (866) 454 5222	
Total Cost: \$	Receipt #:	www.inspectionsgroup.com	
*\$4.50 or 4% of the permit fee maximum \$560.00		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.