

Town of Magrath PO Box 520 Magrath, Alberta, TOK 1J0 PH: (403) 758-3212 info@magrath.ca www.magrath.ca



The Inspections Group Inc

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Please submit all permit applications to south@inspectionsgroup.com for review and processing.

## **GAS PERMIT APPLICATION FORM Development Permit Number: Estimated Project Completion Date:** Building Permit Number (if applicable): Project Value (labour and material): \$ Applicant Type: Owner Contractor **Work:** ☐ has not started ☐ is in progress ☐ is complete OWNER / APPLICANT: Mailing Address: City: Prov: Postal Code: Phone: Fax: Email: \_\_\_ Cell: CONTRACTOR: Mailing Address: City: \_\_\_\_\_\_ Prov: \_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_ Fax: \_\_\_\_ Cell: \_\_\_\_\_\_ Email: \_\_\_\_\_ PROJECT LOCATION: Subdivision / Hamlet Name: \_\_\_\_\_ Municipality: Street Address: Legal Land Description: LSD: \_\_\_\_\_ Part of: \_\_\_\_\_ Section: \_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_ West of: \_\_\_\_ Lot: \_\_\_\_\_ Plan: \_\_\_\_\_ Tax Roll Number: Directions: **BUILDING TYPE:** TYPE OF WORK: **NUMBER OF OUTLETS: SERVICE INFORMATION:** □ Residential ☐ New Work **Furnaces** ☐ Natural Gas ☐ Propane ☐ Commercial ☐ Addition Water Heaters Project Total BTUs ☐ Industrial Renovation, Alteration Fireplaces Institutional Connection **Dryers** PROPANE INSTALLATION: ☐ Agricultural ☐ Temporary Heat **Unit Heaters** ☐ Service ☐ Other (specify) Boilers Propane Tank Set Only ☐ Yes ☐ No ☐ Air Test Barbecues Number of Tanks ☐ Annual Permit Ranges Tank Sizes ☐ Other (specify) Secondary Gas Lines Serial Numbers Other (specify) **Total Outlets** DESCRIPTION OF WORK: Journeyperson's Name (print) Journeyperson's Certificate Number Journeyperson's Signature Homeowner's Signature (homeowner permit only) I hereby declare that I am the owner of the premises where the work will be conducted and/or currently reside or intend to reside on the property. I assume responsibility for ensuring compliance with the applicable Act and Regulations **TIGI OFFICE USE ONLY PAYMENT TYPE: APPLICATION DETAILS:** ☐ Cheque ☐ Mastercard ☐ Visa ☐ AMEX ☐ Interac ☐ e-Transfer ☐ Invoice Application Date: Permit Fee: Permit Number: \_\_\_\_\_ + SCC Levy\*: Receipt #: = Total Cost: \$\_ \* \$4.50 or 4% of the permit fee maximum \$560.00