

Summer Village of Mewatha Beach

PO Box 235
 PLAMONDON AB T0A 2T0
 Phone: (780) 656 6910

www.mymewathabeach.com

**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): _____

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 Mewatha Beach:

Street Address: _____

Legal Subdivision: Part of: _____ **Section:** _____ **Township:** _____ **Range:** _____ **West of:** _____

Subdivision Name: _____ **Lot:** _____ **Block:** _____ **Plan:** _____

Directions: _____

TYPE OF OCCUPANCY:

- Residential
- Farm/Ranch
- Commercial
- Industrial
- Oilfield/Gas
- Institutional
- Mobile
- Manufactured

NUMBER OF FIXTURES:

- Kitchen Sinks _____
- Basins _____
- Showers _____
- Laundry _____
- Toilets _____
- Washers _____
- Bathtubs _____
- Floor Drains _____
- Grease Traps _____
- Bidets/Water Fountains _____
- Urinals _____
- Other _____
(Describe in description of work)

WATER AND OR SEWER SERVICE:

- Disconnect from Septic Connect to Municipal Sewer
- Water and/or Sewer Services
- Mobile Home/Factory Assembled Building Connection
- Seasonal Property? Yes No

PLUMBING DESCRIPTION OF WORK:

- _____
- _____
- _____
- _____
- _____
- ANNUAL PERMIT

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

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.