



Municipality of Crowsnest Pass  
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Please submit all permit applications to [reception@crownsnestpass.com](mailto:reception@crownsnestpass.com) for review and processing.

## DEMOLITION BUILDING PERMIT APPLICATION FORM

**Development Permit Number:** \_\_\_\_\_ **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: \_\_\_\_\_  
 Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**PROJECT LOCATION:**  
 Municipality: \_\_\_\_\_ Subdivision / Hamlet Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 Legal Land Description: LSD: \_\_\_\_\_ Part of: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ West of: \_\_\_\_\_  
 Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_ Tax Roll Number: \_\_\_\_\_  
 Directions: \_\_\_\_\_

**APPLICATION REQUIREMENTS:**  
 Development Permit\*  Proof of Utility Disconnections\*\*  Site Plan\*\*\*  Asbestos Documentation\*\*\*\*

\* A development permit is required from the Municipality of Crowsnest Pass if the building to be demolished is 500 ft<sup>2</sup> or larger.  
 \*\* If the building is serviced by electricity or gas, requests for disconnection must be made through Fortis and ATCO.  
**Please note that this process may take some time, so arrangements should be made in advance.**  
 \*\*\* A site plan with dimensions must indicate property lines, structures, distances to property lines, distances between structures, and other relevant details.  
 \*\*\*\* The applicant must indicate whether asbestos is present in the building. If asbestos is confirmed, a certified abatement report or documentation of proper removal must be submitted in accordance with Alberta's Safety Codes Act and Occupational Health and Safety Code before demolition work can proceed.

<p><b>BUILDING TYPE:</b></p> <p><input type="checkbox"/> Single Family Residential <input type="checkbox"/> Commercial  <input type="checkbox"/> Multi-Family Residential <input type="checkbox"/> Industrial  <input type="checkbox"/> _____ (number of dwellings units) <input type="checkbox"/> Institutional</p>	<p><b>BUILDING AREA:</b> <input type="checkbox"/> m<sup>2</sup> <input type="checkbox"/> ft<sup>2</sup></p> <p>Main Floor _____ Basement _____          Second Floor _____ Garage _____          Third Floor _____ Deck(s) _____</p>
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**DESCRIPTION OF WORK:** \_\_\_\_\_  
 \_\_\_\_\_

<b>Permit Applicant's Name (print)</b> _____	<b>Permit Applicant's Signature</b> _____	<b>Homeowner's Signature (homeowner permit only)</b> _____ <small>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.</small>
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Please be advised that **payment must be received prior to the processing of any code review or the issuance of a permit.** Permits may be canceled upon request; however, depending on the stage of the permit or application at the time of cancellation, **a minimum fee of \$100 will be retained** in accordance with the Municipality of Crowsnest Pass' Permit Fee Schedule.

### OFFICE USE ONLY

<p><b>PAYMENT TYPE:</b></p> <p><input type="checkbox"/> Cheque <input type="checkbox"/> Mastercard <input type="checkbox"/> Visa <input type="checkbox"/> AMEX <input type="checkbox"/> Interac <input type="checkbox"/> e-Transfer <input type="checkbox"/> Invoice</p> <p><b>Permit Fee:</b> \$ _____  <b>+ SCC Levy*:</b> \$ _____  <b>= Total Cost:</b> \$ _____</p> <p style="text-align: right;"><b>Receipt #:</b> _____</p> <p><small>* \$4.50 or 4% of the permit fee maximum \$560.00</small></p>	<p><b>APPLICATION DETAILS:</b></p> <p><b>Application Date:</b> _____  <b>Permit Number:</b> _____  <b>Internal File Number:</b> _____  <b>Wildland Urban Interface Rating:</b> _____</p>
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The personal information provided as part of this application is collected under the authority of the Safety Codes Act, the Municipal Government Act, and in accordance with the Protection of Privacy Act (POPA) and the Access to Information Act (ATIA). This information is required and will be used for issuing permits, verifying and monitoring compliance with safety codes, and for property assessment purposes. The name of the permit holder and the nature of the permit may be made available to the public upon request. If you have any questions about the collection or use of your personal information, please contact the Municipality.