



Town of Vegreville
 PO Box 640
 VEGREVILLE AB T9C 1R7
 Phone: (780) 632 6479
 Fax: (780) 632 6856



www.vegreville.com

PLUMBING PERMIT APPLICATION FORM

Development Permit Number: _____

File Number: _____

Application Date: _____

Estimated Project Completion Date: _____

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 may 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 Town of Vegreville:

Street Address: _____
 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"/> 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"/> Oilfield/Gas	Washers _____		
<input type="checkbox"/> Institutional	Bathtubs _____		
<input type="checkbox"/> Institutional	Floor Drains _____		
<input type="checkbox"/> Mobile	Grease Traps _____		
<input type="checkbox"/> Mobile	Bidets/Water Fountains _____		
<input type="checkbox"/> Manufactured	Urinals _____		<input type="checkbox"/> ANNUAL PERMIT
<input type="checkbox"/> Manufactured	Other _____		

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
 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 .

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. For questions about the collection of personal information, contact the Town of Vegreville Privacy Officer at privacyofficer@vegreville.com, 780-632-7951 or 4829-50 Street, Box 640, Vegreville, Alberta T9C 1R7."