

ELECTRICAL PERMIT APPLICATION FORM

Permit Number: _____

Application Date: DD / MMM / YYYY

Estimated Project Completion Date: DD / MMM / YYYY

Applicant Type: ☐ Homeowner ☐ Contractor

Cost of Installation (Labour & 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 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: _____

Master Electrician Number

Master Electrician Name

Master Electrician Signature

Project Location in the Town of Morinville:

Street Address: _____ Tax Roll #: _____

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

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

Directions: _____

BUILDING TYPE:

- ☐ Single / Multi Family Dwelling
☐ Commercial
☐ Residential
☐ Industrial
☐ Institutional

Square Feet: _____

TYPE OF WORK:

- ☐ New Work
☐ Renovation
☐ Connection
☐ Temporary Service
☐ Other

SERVICE INFORMATION:

Does this installation Require a Service Connection
☐ Yes ☐ No

SUPPLY SERVICE: ☐ Overhead ☐ Underground

Service Information: Amps: _____

Volts: _____

Phase: _____

☐ ANNUAL PERMIT

Description of Work: _____

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
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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.

Personal information is collected for the purpose of administration and delivery of services related to Safety Codes and Development under the applicable legislation and municipal bylaws. Collection is authorized under 4(c) of the Protection of Privacy Act (POPA) and is managed and protected in accordance with the Act. If you have any questions, please contact an Advisor at the Information Management unit at 780-939-4361.