

GAS 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: _____	
Installer's Number _____	Print Installer's Name _____	Installer's 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: _____

TYPE OF OCCUPANCY: ☐ Residential ☐ Farm/Ranch ☐ Commercial ☐ Industrial ☐ Oilfield/Gas ☐ Institutional ☐ Mobile ☐ Manufactured	NUMBER OF OUTLETS: Furnace _____ Water Heater _____ Fireplace _____ Dryer _____ Unit Heater _____ Range _____ Room Heater _____ Boilers _____ Conversion _____ Replacement Appliance _____ Secondary Risers _____ Barbeque _____ Other _____	COMMERCIAL/INDUSTRIAL APPLICATION ONLY: Total _____ BTU Name of Gas Supplier _____ DESCRIPTION OF WORK FOR ALL GAS PERMITS: _____ _____ _____ _____ _____	PROPANE INSTALLATION: No. of Tanks _____ Tank Size _____ Serial # _____ _____ ☐ Vaporizer ☐ Refill Centre ☐ Service Line from Tank to Building ☐ Temporary Heat ☐ Annual Permit
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Payment Type: ☐ Cash ☐ Cheque ☐ Interac ☐ M/C ☐ Visa Permit Fee: \$ _____ + SCC Levy*: \$ _____ Total Cost: \$ _____	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
Receipt #: _____	