

Summer Village of West Baptiste 945 Baptiste Dr. West Baptiste, AB T9S 1R8 Phone 780 675-3900 Fax 780 675-4174 www.svwestbaptiste.ca

the inspections groupinc.

ELECTRICAL PERMIT APPLICATION FORM

oplication Date: DD / MMM / YYYY	CITIOALI LIIVIII AI I	Estimated Project Completion Date: DD / MMM / YYYY
pplicant Type: Homeowner Contractor le Permit Holder hereby certifies that this installation will be completed lissue of the permit, (b) is suspended or abandoned for a period of 120	Cost of Installa in accordance with the Alberta Safety Cod days. An extension can be considered wh	ation (Labour & Material Including Equipment) \$ es Act. A permit may expire if the undertaking to which it applies: (a) is not commenced within 90 days en 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 Summer Village of West Baptiste:		
Street Address: Tax Roll #:		
Legal Subdivision: Part of: Section	on: Township:	Range: West of:
Subdivision Name:	Lot:	Block: Plan:
Directions:		
BUILDING TYPE:	TYPE OF WORK:	SERVICE INFORMATION:
☐ Single / Multi Family Dwelling	☐ New Work	Does this installation Require a Service Connection ☐ Yes ☐ No
☐ Commercial	☐ Renovation	SUPPLY SERVICE: Overhead Underground
Residential	Connection	Service Information: Amps:
☐ Industrial	Temporary Service	Volts:
☐ Institutional	Other	Phase:
Square Feet:		Annual Permit
Description of Work:		
Payment Type: ☐ Cash ☐ Cheque ☐ Interac	M/C Visa	
Permit Fee: \$		The Inspections Group Inc. 300W, 14310 – 111 Avenue NW Edmonton AB T5M 3Z7
+ SCC Levy*: \$		Phone: (780) 454 5048 Toll Free: (866) 554 5048 Fax: (780) 454 5222 Toll Free: (866) 454 5222
Total Cost: \$	Receipt #:	www.inspectionsgroup.com questions@inspectionsgroup.com
*\$4.50 or 4% of the permit fee maximum \$560.00		10

REMIT PAYMENT AND APPLICATION TO THE INSPECTIONS GROUP INC.