



# Electrical Permit Application

Permit Label

Permit Type:  Owner  Contractor  
Application Date (M/D/Y): \_\_\_\_\_

Development Permit Number: \_\_\_\_\_  
Estimated Completion Date (M/D/Y): \_\_\_\_\_

Owner Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
Alt Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_ Fax: \_\_\_\_\_

Contractor: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
Alt Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_ Fax: \_\_\_\_\_

Municipality: COUNTY OF VERMILION RIVER Street Address: \_\_\_\_\_  
Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_ Subdivision/Hamlet Name: \_\_\_\_\_  
Legal Subdivision: \_\_\_\_\_ Part of: \_\_\_\_\_ ¼ Sect: \_\_\_\_\_ Twp: \_\_\_\_\_ Rg: \_\_\_\_\_ W of: \_\_\_\_\_ Tax Roll #: \_\_\_\_\_  
Directions: \_\_\_\_\_

**Building Use:**  Farm  Residential  Commercial  Industrial  Institutional  Oil & Gas  Other (specify) \_\_\_\_\_  
**Type of Work:**  New  Renovation  Addition  Accessory Building  Manufactured  Connection  Temporary Service  Basement development  
**Service Information:** Does this installation require a Service Connection  Yes  No  
**Supply Service:** Amperes: \_\_\_\_\_ Voltage: \_\_\_\_\_ Phase: \_\_\_\_\_  Underground  Overhead  
**Detailed Description of Work:** \_\_\_\_\_  
Main Floor \_\_\_\_\_ sq. ft or m  
2<sup>nd</sup> Floor \_\_\_\_\_ sq. ft or m  
Dev. Basement \_\_\_\_\_ sq. ft or m  
Attached Garage \_\_\_\_\_ sq. ft or m

**Permit Applicant Declaration:** The permit applicant certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations and work will commence within 90 days. The permit applicant/owner acknowledges that as per Section 12(2) of the Alberta Safety Codes Act; A Safety Codes Agency is not liable for any decision related to the system of inspections, examinations, evaluations and investigations including but not limited to a decision relating to their frequency and the manner in which they are carried out. The personal information requested on this form is being collected for purposes provided under Section 33(c) of the Freedom of Information and Protection of Privacy Act and is protected by the Act.  
Master's Name (Please print) \_\_\_\_\_ Master's Signature \_\_\_\_\_ Homeowner's Signature (Homeowner permits only)  
Master's Certification Number \_\_\_\_\_ *(SEE HOMEOWNER'S DECLARATION FORM)*

**Project Value (Materials & Labour):** \$ \_\_\_\_\_ **Total Developed Area:** \_\_\_\_\_ Sq. Ft.  
**Permit Fee:** \$ \_\_\_\_\_ Payment Method:  Credit Card  Debit  Cheque  Cash  
**\*SCC Levy:** \$ \_\_\_\_\_ Authorization / Cheque Number \_\_\_\_\_  
**TOTAL FEE:** \$ \_\_\_\_\_ Credit Card #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_  
*R \*SCC Levy is 4% of the permit fee with a minimum of \$4.50 and a maximum of \$560* Date of Authorization: \_\_\_\_\_  
Name of Cardholder: \_\_\_\_\_  
Signature of Cardholder: \_\_\_\_\_

**Permit Validation Section to be completed by the Permit Issuer:**  
Special Conditions: \_\_\_\_\_  
Permit Issuer's Name (print or type) \_\_\_\_\_ Permit Issuer's Signature \_\_\_\_\_  
Permit Issuer's Designation Number: \_\_\_\_\_ Date of Issue (M/D/Y): \_\_\_\_\_

PLEASE CONTACT YOUR SELECTED SAFETY CODES AGENCY FOR INSPECTIONS ALLOWING 48 HRS NOTICE FOR INSPECTION

## HOMEOWNER'S DECLARATION FORM

The owner of anything, process or activity to which this (Safety Codes Act) Act applies shall ensure that it meets the requirements of this Act, that the thing is maintained as required by the regulations and that when the process or activity is undertaken it is done in a safe manner. 1991 cS-0.5 ss

"Homeowner" means a person as the owner of the fee simple estate of land, who resides or, with respect to a residence that is under construction, intends to reside in a freestanding single family dwelling, located on the land.

- (A) You must **OWN** and **LIVE IN** or **WILL LIVE IN** the single family residence in which you wish to do the work for the following permits: building, electrical, plumbing or gas;
- (B) You must have knowledge and be personally capable to perform the work/installation.

I am the registered Homeowner, whose name appears on the land title of the property indicated below and accept full responsibility for the work I propose to do that will be in compliance with the Safety Codes Act and Regulations. All information provided is true and correct.

Having read and understood the above conditions I declare that I know how, will **PERSONALLY** install and take full responsibility for the work I propose.

CIVIC ADDRESS: \_\_\_\_\_

LOT \_\_\_\_\_ BLOCK \_\_\_\_\_ PLAN \_\_\_\_\_

LEGAL SUBDIVISION: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Note: A permit is not a guarantee or assurance of the quality of the work, system, or project to be undertaken, nor does it guarantee the longevity of a material, product, or assembly. The undertaking needs to satisfy the requirements of the applicable Codes and Standards.

### **OFFICE USE ONLY**

*Permit # issued:* \_\_\_\_\_

*Date issued:* \_\_\_\_\_

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