



Red Deer County Centre  
 38106 Range Road 275  
 Red Deer County, AB T4S 2L9  
 403.350.2170  
 www.rdcountry.ca  
 inspections@rdcounty.ca

Permit label

**ELECTRICAL PERMIT APPLICATION FORM**

Permit Applicant:  Owner  Contractor Application Date (mmm/dd/yyyy): \_\_\_\_\_  
 Other Permits Required (under separate application):  Building  Plumbing  Gas  PSDS Estimated Project Completion Date (mmm/dd/yyyy): \_\_\_\_\_  
 Development Permit No.: \_\_\_\_\_ New Home Warranty No.(if applicable): \_\_\_\_\_

Owner Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Cell: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Cell: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Hamlet/ Subdivision Name: \_\_\_\_\_ Tax Roll No.: \_\_\_\_\_  
 Street/Rural Address: \_\_\_\_\_ Unit: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_  
 Legal Subdivision: Part of: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ West of: \_\_\_\_\_ M  
 Directions: \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

Work has not started  Work is in progress  Work is complete

TYPE OF PROJECT	TYPE OF WORK	SERVICE	PROJECT INFORMATION
<input type="checkbox"/> Residential <input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Oil and Gas <input type="checkbox"/> Other: _____	<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Connection Only <input type="checkbox"/> Renovation <input type="checkbox"/> Accessory Building <input type="checkbox"/> Secondary Suite <input type="checkbox"/> Basement Development <input type="checkbox"/> Service <input type="checkbox"/> Temporary Service	<input type="checkbox"/> Overhead <input type="checkbox"/> Underground Amps: _____ Voltage: _____ Phase: _____	<input type="checkbox"/> sq ft <input type="checkbox"/> sq m Main Floor Area: _____ 2nd Floor Area: _____ Developed Basement: _____ Garage: _____ Other: _____ <b>Total Developed Area:</b> _____  Work Value: \$ _____

**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, Red Deer County 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. **F.O.I.P. Notification:** Personal information is collected under the authority of Section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act and section 63 of the Safety Codes Act. It will be used for processing permit applications, issuing permits, safety codes compliance monitoring and verification. Questions regarding the collection of personal information can be directed to the F.O.I.P. Coordinator 403.350.2150.

Master Electrician's Name (print) \_\_\_\_\_ Master Electrician's Signature \_\_\_\_\_ Homeowner's Signature (homeowner permit only) **Homeowner Declaration: By signing this I hereby certify that I own/will own and occupy this dwelling.**  
 Master Electrician's Certification No.: \_\_\_\_\_ Certification Valid until: \_\_\_\_\_

For Office Use Only		Building Permit No.:
Permit Fee: \$ _____	SCC Levy: \$ _____	Total Cost: \$ _____
SCC levy 4% of the permit fee with minimum of \$4.50 and a maximum of \$560.00		
<input type="checkbox"/> Cash <input type="checkbox"/> Debit <input type="checkbox"/> Cheque No.: _____	<input type="checkbox"/> Invoice No.: IVC _____	File No.: _____
Receipt No.: _____		
<b>Permt Validation Section to be completed by the Permit Issuer:</b>		
Special Conditions: <b>Site inspection(s) are required to ensure compliance with the Safety Codes Act of Alberta.</b>		
Permit Issuer's Name: _____	Permit Issuer's Signature: _____	
Designation No.: _____	Permit Issue Date (mmm/dd/yyyy): _____	

For inspections, please contact IJD Inspections Ltd. 403-346-6533 or <http://www.ijd.ca/request-an-inspection>.