



## ELECTRICAL PERMIT APPLICATION FORM

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

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

**Electrical 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: \_\_\_\_\_ ¼ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ West of: \_\_\_\_\_ M  
 Directions: \_\_\_\_\_

Description of Work: \_\_\_\_\_  
 Electrical work has not started  Electrical work in progress  Electrical Work complete

TYPE OF PROJECT	TYPE OF WORK	NEW 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"/> RTM <input type="checkbox"/> Manufactured/Mobile Home <input type="checkbox"/> Skid Units <input type="checkbox"/> Other: _____	<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> _____ Electrical Work Value: \$ _____ <small>(include material &amp; labour)</small>

**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: \_\_\_\_\_

Permit Fee: \$ \_\_\_\_\_ Building Permit No.: \_\_\_\_\_ File No.: \_\_\_\_\_ Receipt No.: \_\_\_\_\_ Region: \_\_\_\_\_  
 \*SCC Levy: \$ \_\_\_\_\_  Cash  Debit  Credit Card  Cheque No.: \_\_\_\_\_  Invoice No.: IVC  
 Total Fee: \$ \_\_\_\_\_ Credit Card No.: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
\*SCC levy 4% of the permit fee with minimum of \$4.50 and a maximum of \$560.00 Name on Credit Card: \_\_\_\_\_ Signature on Card: \_\_\_\_\_

### FOR OFFICE USE ONLY

**Permit Validation Section to be completed by the Permit Issuer:**  
 Special Conditions: **Site inspection(s) are required to ensure compliance with the Safety Codes Act of Alberta.**  
 Permit Issuer's Name: \_\_\_\_\_ Permit Issuer's Signature: \_\_\_\_\_  
 Designation No.: \_\_\_\_\_ Permit Issue Date (mmm/dd/yyyy): \_\_\_\_\_