



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

Permit label

**ANNUAL ELECTRICAL PERMIT APPLICATION FORM**

Application Date (mmm/dd/yyyy): \_\_\_\_\_

**FACILITY INFORMATION**

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

**ELECTRICIAN INFORMATION**

Contractor: \_\_\_\_\_ 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: \_\_\_\_\_

<b>Project/Plant Information</b>	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Institutional
Project/Plan Use: _____			
KVA Rating of Establishment: _____		Projected Annual Electrical Installation Costs: \$ _____	

**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.

Electrician's Name (print) \_\_\_\_\_ Electrician's Signature \_\_\_\_\_ Owner's / Manager's Signature \_\_\_\_\_

Electrician's Certification No.: \_\_\_\_\_

For Office Use Only			
Permit Fee: \$ _____	SCC Levy: \$ _____	Total Cost: \$ _____	Region: _____
SCC levy 4% of the permit fee with minimum of \$4.50 and a maximum of \$560.00		Receipt No.: _____	
<input type="checkbox"/> Cash	<input type="checkbox"/> Debit	<input type="checkbox"/> Cheque No.: _____	<input type="checkbox"/> Invoice
		File No.: _____	

**Permit Validation Section to be completed by the Permit Issuer:**

Special Conditions: \_\_\_\_\_

Permit Issuer's Name: \_\_\_\_\_ Permit Issuer's Signature: \_\_\_\_\_

Designation No.: \_\_\_\_\_ Permit Issue Date (mmm/dd/yyyy): \_\_\_\_\_