Village of Kitscoty
PO Box 128, 5011 50 St.
Kitscoty, AB T0B 2P0
Phone: (780) 846 2221
Fax: (780) 846 2213
www.vokitscoty.ca

Permit Sticker

The Inspections Group Inc.
12010 – 111 Avenue NW
Edmonton, AB T5G 0E6
Phone: (780) 454 5048 / (866) 554 5048
Fax: (780) 454 5222 / (866) 454 5222
www.inspectionsgroup.com

PLUMBING PERMIT APPLICATION FORM

Application Date: DD / MMM / YYYY **Estimated Project Completion Date:** DD / MMM / YYYY

Applicant Type: ☐ **Homeowner** ☐ **Contractor** **Cost of Installation (Labor & Material):** _____

The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act & Regulations. Section 25(1) of the Permit Regulation AR 204/2007 of the Safety Codes Act Section 25(1) states: "A permit expires if the undertaking to which it applies: (a) is not commenced within 90 days of issue of the permit, (b) is suspended or abandoned for a period of 120 days." Please note that an extension can be considered when 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.

Contractor Name: _____ Mailing Address: _____

City: _____ Prov: _____ Postal Code: _____ Phone: _____ Fax: _____

Cell: _____ Email: _____

_____ _____ _____

Installer's Number | Print Installer's Name | Installer's Signature

Project Location in The Village of Kitscoty:

Street Address: _____

Legal Subdivision: Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____

Subdivision Name: _____ Lot: _____ Block: _____ Plan: _____

Directions: _____

TYPE OF OCCUPANCY:

- ☐ Residential
- ☐ Farm/Ranch
- ☐ Commercial
- ☐ Industrial
- ☐ Oilfield/Gas
- ☐ Institutional
- ☐ Mobile
- ☐ Manufactured

SINGLE FAMILY APPLICATION ONLY:
(Number Of Fixtures)

Kitchen Sinks	_____
Basins	_____
Showers	_____
Laundry	_____
Toilets	_____
Washers	_____
Bathtubs	_____
Floor Drains	_____
Grease Traps	_____
Bidets/Water Fountains	_____
Urinals	_____
Other	_____
Total	_____

WATER AND OR SEWER SERVICE:

- ☐ Disconnect from Septic Connect to Municipal Sewer
- ☐ Water and/or Sewer Services
- ☐ Mobile Home/Factory Assembled Building Connection

PLUMBING DESCRIPTION OF WORK:

_____
_____
_____
_____
_____
_____
_____

Payment Type: ☐ Cash ☐ Cheque ☐ C/C Agreement ☐ Interac

Permit Fee: $_____

+ SCC Levy*: $_____

Total Cost: $_____ Receipt #: _____

*$4.50 or 4% of the permit fee maximum $560.00

TIGI OFFICE USE ONLY

Issuing Officer's Name: _____

Issuing Officer's Signature: _____

Designation Number: _____

Permit Issue Date: DD / MMM / YYYY

REMIT PAYMENT & APPLICATION TO THE INSPECTIONS GROUP INC.

PLEASE CONTACT THE INSPECTIONS GROUP INC. PRIOR TO COVER OR CONCEALMENT FOR INSPECTIONS ALLOWING TWO WORKING DAYS NOTICE AND PROVIDE SAFE ACCESS.

The personal information provided as part of this application is collected under Sec. 43 of the Safety Codes Act and Sections 303 and 295 of the Municipal Government Act and in accordance with Section 32.c of the Freedom of Information and Protection of Privacy Act.