

Village of Kitscoty

Kitscoty, AB T0B 2P0 Phone: (780) 846 2221

Fax: (780) 846 2213 www.vokitscoty.ca

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

ELECTRICAL PERMIT APPLICATION FORM

pplication Date:DD / MMM / YYYY		Estimated Project Completion Date:DD / MMM / YYYY		
Applicant Type: Homeowner Contractor Cost of Installation (Labour & Material)\$ The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act. A permit may expire 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. 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: 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. I am doing the work myself, and assume responsibility for compliance with the applicable Act and Regulations"				
Company Name:	Company Name: Mailing Address:			
City:Prov:	Postal Code:	Phone:	Fax:	
Cell:Email:	:			
Master Electrician Number	Master Electrician Name		Master Electrician Signature	
Project Location in the Town of Kitscoty: Street Address: Tax Roll #:				
Legal Subdivision: Part of: Section	on: Township:	Range:	West of:	
Subdivision Name:	Lot:	Block:	Plan:	
Directions:				
BUILDING TYPE:	TYPE OF WORK:	SERVICE INF	ORMATION:	
☐ Single / Multi Family Dwelling	☐ New Work		allation Require a Service Connection] No	
☐ Commercial	Renovation		RVICE: Overhead Underground	
Residential	☐ Connection	00112102.	.VICE. Overhead Ondorground	
☐ Industrial	☐ Temporary Service	Service Inform	nation: Amps:	
☐ Institutional	☐ Other	Volts:		
Square Feet:			Phase:	
Description of Work:				
I the permit applicant understand and acknowledge the selected inspection stages will take place at my request. Any additional inspections requested may be charged at a rate of \$100 per inspection (plus Levy). Accept			arm Building permits with a value of work over m Building permits with a value of work under rmits with a value of work over \$4000 must select	
Payment Type: ☐ Cash ☐ Cheque ☐ C/C	Payment Type: Cash Cheque C/C Agreement Interac TIGI OFFICE USE ONLY			
Permit Fee: \$		Issuing Officer's Name:		
+ SCC Levy*: \$	l	Issuing Officer's Signature:		
Total Cost: \$	Receipt #:	Designation Number:		
*\$4.50 or 4% of the permit fee maximum \$560.00		Permit Issue Date:DD/MMM/YYYY		

PLEASE REMIT PAYMENT TO THE INSPECTIONS GROUP INC.

PLEASE CONTACT THE INSPECTIONS GROUP INC. PRIOR TO DRYWALL FOR INSPECTIONS ALLOWING 2 - 5 WORKING DAYS NOTICE AND PROVIDE SAFE ACCESS.