



Lac La Biche County
 P.O. Box 1679
 LAC LA BICHE AB T0A 2C0
 Phone: (780) 623 1747
 Fax: (780) 623 3510
 www.laclabichecounty.com

SUBMIT APPLICATION TO:
 planning.development@laclabichecounty.com
 or
 Fax: (780)623-2039

The Inspections Group Inc.
 #110, 4910 50 Avenue
 COLD LAKE AB T9M 0G1
 Phone: (780) 594 4301 (888) 853 6411
 Fax: (780) 594 3720 (844) 750 3721
 www.inspectionsgroup.com

ELECTRICAL PERMIT APPLICATION FORM

eSITE Permit Number: _____ Development Number: _____

Application 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: _____

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: _____ Mailing Address: _____
 City: _____ Prov: _____ Postal Code: _____ Phone: _____ Fax: _____
 Cell: _____ Email: _____

Master Electrician Number: _____ Master Electrician Name: _____ Master Electrician Signature: _____

Project Location in Lac La Biche County:
 Street Address: _____ Tax Roll #: _____
 Legal Subdivision: Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____
 Subdivision Name: _____ Lot: _____ Block: _____ Plan: _____
 Directions: _____

<p>BUILDING TYPE:</p> <input type="checkbox"/> Single / Multi Family Dwelling <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional Square Feet: _____	<p>TYPE OF WORK:</p> <input type="checkbox"/> New Work <input type="checkbox"/> Accessory Building <input type="checkbox"/> Renovation <input type="checkbox"/> Addition <input type="checkbox"/> Connection <input type="checkbox"/> Renovation <input type="checkbox"/> Temporary Service <input type="checkbox"/> Basement Development <input type="checkbox"/> Other _____	<p>SERVICE INFORMATION:</p> Does this installation Require a Service Connection <input type="checkbox"/> Yes <input type="checkbox"/> No SUPPLY SERVICE: <input type="checkbox"/> Overhead <input type="checkbox"/> Underground Service Information: Amps: _____ Volts: _____ Phase: _____
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Description of Work: _____

<p>Payment Type: <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card <input type="checkbox"/> Interac</p> <p>Permit Fee: \$ _____</p> <p>+ SCC Levy: \$ _____</p> <p>Total Cost: \$ _____ Receipt #: _____</p> <p>*\$4.50 or 4% of the permit fee maximum \$560.00</p>	<p>OFFICE USE ONLY</p> <p>Issuing Officer's Name: _____</p> <p>Issuing Officer's Signature: _____</p> <p>Designation Number: _____</p> <p>Permit Issue Date: DD / MMM / YYYY</p>
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REMIT PAYMENT TO LAC LA BICHE COUNTY.

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

The personal information provided as part of this application is collected under the Safety Codes Act and the Municipal Government Act and in accordance with the Freedom of Information and Protection of Privacy Act. The information is required and will be used for issuing permits, safety codes compliance verification and monitoring, and property assessment purposes. The name of the permit holder and the nature of the permit is available to the public upon request. If you have any questions about the collection or use of the personal information provided, please contact the Municipality.