

Electrical Permit Application

Permit Label

Other Permits Required: Building Plumbing Gas PSDS Supply Service Required: Yes No

Permit Type: Owner Contractor Development Permit Number: _____

Application Date (M/D/Y): _____ Estimated Completion Date (M/D/Y): _____

Owner Name: _____ **Mailing Address:** _____

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

Alt Phone: _____ Email Address: _____ Fax: _____

Contractor: _____ **Mailing Address:** _____

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

Alt Phone: _____ Email Address: _____ Fax: _____

Project Location:

Municipality: _____ **Street Address:** _____

Unit #: _____ Lot: _____ Block: _____ Plan: _____ Subdivision or Hamlet _____

Legal Subdivision: Part of: _____ ¼ Sect: _____ Twp: _____ Rg: _____ W of: _____ Tax Roll #: _____

Directions: _____

Project Information: Commercial Residential Multi Family Industrial Institutional Oil & Gas

Type of Work: New Renovation Addition Accessory Building Basement Dev. Connection Only Temp Service Other

Service: Amperes: _____ Voltage: _____ Phase: _____ Underground Overhead

Detailed Description of Work:

Main Floor: _____ sq. ft.
 2nd Floor: _____ sq. ft.
 Dev. Basement: _____ sq. ft.
 Attached Garage: _____ sq. ft.

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; Superior Safety Codes Inc. 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. The personal information provided on this form is protected by the Freedom of Information and Protection of Privacy Act.

Master's Name (Please print) _____ Master's Signature _____ Homeowner's Signature (Homeowner permits only) _____

Master's Certification Number _____ *Homeowner Declaration: By signing this permit I hereby certify that I own or will own and occupy this dwelling.*

Project Value (Materials & Labour): \$ _____ **Total Developed Area:** _____ Sq. Ft

Permit Fee: \$ _____ ***SCC Levy:** \$ _____ **TOTAL FEE:** \$ _____

*SCC Levy is 4% of the permit fee with a minimum of \$4.50 and a maximum of \$560

Payment Method: Visa M/C Debit Cheque Cash Authorization / Cheque Number _____

Credit Card #: _____ Expiry Date: _____ Date of Authorization: _____

Name of Cardholder: _____ Signature of Cardholder: _____

Permit Validation Section to be completed by the Permit Issuer:

Special Conditions: _____

Permit Issuer's Name (print or type) _____ Permit Issuer's Signature _____

Permit Issuer's Designation Number: _____ Date of Issue (M/D/Y): _____

Calgary	25, 2015 – 32 Avenue NE	T2E 6Z3	Ph: 403.717.2344	Toll Free Ph: 1.888.717.2344	Fax: 403.717.2340	Toll Free Fax: 1.888.717.2340
Edmonton	14613 – 134 Avenue	T5L 4S9	Ph: 780.489.4777	Toll Free Ph: 1.866.999.4777	Fax: 780.489.4711	Toll Free Fax: 1.866.900.4711
Fort McMurray	165, 101 Signal Road	T9H 4N6	Ph: 780.715.7726	Toll Free Ph: 1.877.715.7726	Fax: 780.715.7731	Toll Free Fax: 1.877.815.7731
Grande Prairie	1 st Floor 10525 – 100 Avenue	T8V 0V8	Ph: 780.882.8777	Toll Free Ph: 1.877.882.8777	Fax: 780.882.7677	Toll Free Fax: 1.877.882.8775
Lethbridge	422 North Mayor Magrath Dr.	T1H 6H7	Ph: 403.320.0734	Toll Free Ph: 1.877.320.0734	Fax: 403.320.9969	
Lloydminster	Bay 1, 2914 – 50 Avenue	T9V 2S5	Ph: 780.870.9020		Fax: 780.870.9036	
Red Deer	3, 6264 – 67A Street	T4P 3E8	Ph: 403.358.5545	Toll Free Ph: 1.888.358.5545	Fax: 403.358.5085	Toll Free Fax: 1.866.358.5085