

Plumbing Permit Application Form

 Other Permits Required: Building Electrical Gas PSDS

 Permit Type: Owner Contractor

Development Permit Number: _____

Application Date (M/D/Y): _____

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

Mailing Address
Owner Name: _____ **Address:** _____
 Phone: _____ Fax: _____ City: _____ Prov: _____ Postal Code: _____
 Alt Phone: _____ Email Address: _____

Mailing Address
Contractor: _____ **Address:** _____
 Phone: _____ Fax: _____ City: _____ Prov: _____ Postal Code: _____
 Alt Phone: _____ Email Address: _____

Municipality: _____ **Street Address:** _____
 Lot: _____ Block: _____ Plan: _____ Tax Roll #: _____
 Legal Subdivision: Part of: _____ ¼ Sect: _____ Twp: _____ Rg: _____ W of: _____ Subdivision: _____
 Directions: _____

Project Information: Commercial Residential Multi Family Industrial Institutional
Type of Work: New Renovations Relocation Addition Temp Heat Basement Development Other _____
Description of Work: _____

Plumbing (Insert number of each item):	Total Developed Area		
# Kitchen Sinks: _____	# Laves/Wash Basins: _____	# Showers: _____	# Laundry Tubs: _____
# Water Closets: _____	# Automatic Washers: _____	# Bathtubs: _____	# Floor Drains: _____
# Sumps: _____	# Bar Sink: _____	# Urinals: _____	# Other Fixtures: _____
# Water Sewer Connection: _____	Total # of Fixtures: _____		

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.

 Journeyman's Name & Certification # (Please print) Journeyman's Signature Homeowner's Signature (Homeowner permits only)

Permit Fee: \$ _____ ***SCC Levy: \$** _____ (*3.5% of permit fee with a minimum of \$4.00) **TOTAL FEE: \$** _____
 Payment Method: Visa M/C Debit Cheque Cash Auth / Chq. Number _____
 Name of Cardholder: _____ Signature of Cardholder: _____
 Credit Card #: _____ Expiry Date: _____

Permit Validation Section (to be completed by the Safety Codes Officer):
 Special Conditions: _____

 Issuing Officer's Name (print or type) Issuing Officer's Signature
 Issuing Officer's Designation Number: _____ Date of Issue (M/D/Y): _____