

**ELECTRICAL PERMIT APPLICATION FORM**

Development Permit No.: \_\_\_\_\_ Other Permits Required (under separate application):  Building  Plumbing  Gas  PSDS  
 Application Date (mmm/dd/yyyy): \_\_\_\_\_ Estimated Project Completion Date (mmm/dd/yyyy): \_\_\_\_\_  
 Permit Applicant:  Owner  Contractor Value of Installation (labour and material): \$ \_\_\_\_\_

**Owner Name:** \_\_\_\_\_ **Mailing Address:** \_\_\_\_\_  
 City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Cell: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

**Contractor Name:** \_\_\_\_\_ **Mailing Address:** \_\_\_\_\_  
 City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

**Project Location:** Municipality: \_\_\_\_\_ Subdivision Name: \_\_\_\_\_ Tax Roll No.: \_\_\_\_\_  
 Street/Rural Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_ LSD: \_\_\_\_\_ Quarter: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ West of: \_\_\_\_\_  
 Directions: \_\_\_\_\_

Description of Work:  Work has not started  Work is in progress  Work is complete

TYPE OF OCCUPANCY	TYPE OF WORK	SERVICE AND DEVELOPED AREA
<input type="checkbox"/> Single Residential <input type="checkbox"/> Multi-family <input type="checkbox"/> Farm/Ranch <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Manufactured/Mobile Home <input type="checkbox"/> Oil and Gas <input type="checkbox"/> Skid Units <input type="checkbox"/> Other: _____	<input type="checkbox"/> New <input type="checkbox"/> Renovation <input type="checkbox"/> Connection Only <input type="checkbox"/> Service <input type="checkbox"/> Temporary Service <input type="checkbox"/> Annual Permit <input type="checkbox"/> Other: _____	<input type="checkbox"/> Overhead <input type="checkbox"/> Underground  <input type="checkbox"/> ft <sup>2</sup> <input type="checkbox"/> m <sup>2</sup> Amps: _____ Main Floor: _____ Volts: _____ 2 <sup>nd</sup> Floor: _____ Phase: _____ Developed Basement: _____ Garage: _____ Other: _____ <b>Total Developed Area:</b> _____

**FOIP Notification:** Personal information collected on this form is collected under the authority of section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act. It is used for processing permit applications, issuing permits, safety codes compliance monitoring, verification and program evaluation. The name of the permit holder and nature of the permit may be included on reports provided to a municipality or made available to the public as required or allowed by legislation. Questions about this collection may be directed to ASCA Coordinators at 1-888-413-0099 or at Suite 500, 10405 Jasper Avenue, Edmonton, AB T5J 3N4.

Master Electrician's Name (print) \_\_\_\_\_ Master Electrician's Signature \_\_\_\_\_  
 Master Electrician's Certification No.: \_\_\_\_\_ Homeowner's Signature (homeowner permit only) \_\_\_\_\_  
**Homeowner Declaration: By signing this application I hereby certify that I own/will own and occupy this dwelling.**

Office Use Only		
Permit Fee: \$ _____	SCC Levy: _____	Issuing Officer's Name: _____
Total Cost: \$ _____	(\$4.50 or 4% of the permit fee maximum \$560.00)	Issuing Officer's Signature: _____
Receipt No.: _____		Designation No.: _____
<input type="checkbox"/> Cash <input type="checkbox"/> Debit <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card (attach signed credit card authorization form)		Permit Issue Date (mmm/dd/yyyy): _____