



IJD Inspections Ltd.
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 www.ijd.ca

PERMIT # _____

Office Use

PLUMBING PERMIT APPLICATION FORM

Permit Applicant: Owner Contractor Application Date (mm/dd/yyyy): _____
 Development Permit No.(if applicable): _____ Estimated Project Completion Date (mm/dd/yyyy) _____

Owner Name: _____ Mailing Address: _____
 City: _____ Province: _____ Postal Code: _____ Phone: _____
 Cell: _____ Email: _____ Fax: _____

Contractor Name: _____ Mailing Address: _____
 City: _____ Province: _____ Postal Code: _____ Phone: _____
 Cell: _____ Email: _____ Fax: _____

Municipality of Project: _____ Subdivision/Hamlet: _____
 Street/Rural Address: _____ Apt/Unit: _____ Lot: _____ Block: _____ Plan: _____
 Legal Subdivision: Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____ M

Description of Work:

Work has not started Work is in progress Work is completed Unknown when work was completed (permit needed for home sale)

TYPE OF OCCUPANCY	TYPE OF WORK	NUMBER OF FIXTURES	
<input type="checkbox"/> Single Family <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"/> Relocatable Industrial # of drops _____ <input type="checkbox"/> Other _____	<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Renovation (Interior) <input type="checkbox"/> Accessory Building <input type="checkbox"/> Basement Development <input type="checkbox"/> Service Connection <input type="checkbox"/> Annual Permit <input type="checkbox"/> Manufactured Homes/RTM # of drops _____ Foundation Type _____ <input type="checkbox"/> Other _____	Kitchen Sinks: _____ Lavatory Sinks: _____ Showers: _____ Bathtubs: _____ Toilets/Bidets: _____ Urinals: _____ Janitor Sink: _____ Total # of Fixtures _____	Laundry Tubs: _____ Clothes Washer: _____ Roof Drains: _____ Floor Drains: _____ Grease Traps: _____ Water Fountains: _____ Other Fixtures: _____

Permit Applicant Declaration: The permit applicant certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations. The personal information provided is authorized under section 4(c) of the Protection of Privacy (POPA) 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.

Journeyman's Name (please print) _____ **X** Journeyman's Signature _____ **OR X** Homeowner's Signature (homeowner permit only) Homeowner Declaration:
 Journeyman's Certification No.: _____ By signing this I hereby certify that I own/will own and occupy this dwelling.

PERMIT FEE SUMMARY			
Permit Fee:	\$ _____	Permits are GST Exempt	Permit Fee Adjustment \$ _____
SCC Levy:	\$ _____		SCC Levy Adjustment \$ _____
Travel Fee:	\$ _____		Subtotal \$ _____
Total Permit Cost	\$ _____	SCC levy 4% of the permit fee with minimum of \$4.50 and a maximum of \$560.00	Total Payable \$ _____
Receipt#	_____		Total Refund \$ _____
<input type="checkbox"/> Cash <input type="checkbox"/> E-Transfer (to: permits@ijd.ca) <input type="checkbox"/> Cheque <input type="checkbox"/> Debit <input type="checkbox"/> Credit Card			

NOTE: This form MUST be signed by either the Homeowner (homeowner permits) or the Journeyman (contractor permits).

Save As New

Print Form to Sign