

Plumbing Permit Application

Development Permit No. (if applicable):		Estimated Start Date (mm/dd/yyyy):stimated Completion Date (mm/dd/yyyy):		
Owner Name (printed):				
	City/Town/Villag	ie. P	Province: Postal Code:	
*Email: Owners Pho		hone #	Fax #:	
Contracting Company Name (printed): Contact Name (printed):				
Mailing Address: City/Town/Village:				
*Email:	Owners PI	hone #:	Fax #:	
Project Location		_		
	Subdivision/ Hamlet Name:	lax	Tax Roll No.:	
Street/ Rural Address:			Unit:	
* Legal land description is required		O a thomas	able Day was Mark of	
	Plan: LSD: Qua	irter: Section: Iown	snip: Range: West of:	
Directions:				
Description of Work (please provide a complete and detailed description of the work to be completed including all applicable drawings/ documents): □ Work has not started □ Work is in progress □ Work is complete				
WORK SHOULD	NOT COMMENCE BEFORE PERMIT IS ISSU		TED BEFORE COVERING	
TYPE OF OCCUPANCY	TYPE OF WORK	NUM	BER OF FIXTURES	
☐Single Family Residential	□New	Kitchen Sink:	Floor Drain:	
☐ Multi-Family Residential	□Addition			
_			<u> </u>	
# of units:	□Renovation/ Alteration	Shower:	Bidet:	
□ Agricultural (Farm)	☐Accessory Building	Laundry Tub:	Drink Fountain:	
☐ Commercial	☐Basement Development			
□Industrial	☐ Service Connection	Toilet:	Urinal:	
□Institutional	□Annual Permit	Automatic Washer:	Roof Drain:	
□Other	□Relocatable Industrial	Bathtub:	Mop Sink:	
	# of drops			
	# of drops	Non-Potable Water System:		
	# of drops	Other Fixtures (Specify).		
	Foundation Type:	lotal # of Fixtures.		
	□Other			
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The personal information you provide to Alberta Safety Codes Authority (ASCA) and the Safety Codes Council is authorized under section 4(c) of the Protection of Privacy (POPA) Act. This information is used to support the administration and delivery of services within ASCA's scope under the Safety Codes Act. This includes, but is not limited to, certification, accreditation, training programs, and program evaluation and planning purposes (including processing permit applications, issuing permits, monitoring and verifying compliance, and conducting investigations and audits). Information may be shared with municipalities, contracted accredited agencies, or other regulatory or governmental bodies as authorized by legislation. ASCA may disclose information in esponses to permit aspart requests associated with land transactions or due diligence processes. Additionally, contact information may be used for the Council's annual survey. Please direct questions concerning the collection of this information to the Privacy Information Coordinator at the Safety Codes Council, Suite 500, 10405 Jasper Ave. NW, Edmonton, Albria, TSJ 3N4, Email: privacy@safetycodes.ab.ca				
Certified Installer's Name (please print) Certification No.		on No.	Certified Installer's Signature	
Lieuna and Cignoturo (hanna ann	"			
Homeowner's Signature (homeowner permit only) Homeowner Declaration: 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.				
OFFICE USE ONLY				
Other Permits Required □ Building □ Electrical □ Gas □ Private Sewage [Received Date Stamp] □ Not Applicable [Received Date Stamp]				
Damesit Face &				
Permit Fee: \$				
SCC Levy: \$	00.00			
(\$4.50 or 4% of the permit fee maximum \$56				
Travel Fee: \$ Total Cost: \$				
Total Cost. p				
Receipt No.:		eSITE Permit No.:	eSITE Permit No.:	
□Invoiced □Cash □Cheque □Debit		Agency File No.:		
Agency File No.: Agency File No.:				