



4905 - 51 Avenue
 Stony Plain, AB T7Z 1Y1
 T: 780.963.2151
 F: 780.963.0935

Electrical Permit Application

Permit Label

Supply Service Required: Yes No

eSITE Permit Number: 301301-_____

Permit Type: Owner Contractor

Building Permit Number: _____

Application Date (M/D/Y): _____

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

Owner: _____ Mailing Address: _____
 City: _____ Prov.: _____ Postal Code: _____ Phone: _____
 Cell Number: _____ Email Address: _____ Fax: _____

Contractor: _____ Mailing Address: _____
 City: _____ Prov.: _____ Postal Code: _____ Phone: _____
 Cell Number: _____ Email Address: _____ Fax: _____

Project Location:
 Street Address: _____ Subdivision Name: _____
 Unit or Suite #: _____ Lot: _____ Block: _____ Plan: _____ Tax Roll #: _____
 Legal Subdivision: Part of: _____ ¼ Sect: _____ Twp: _____ Rge: _____ W of: _____
 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
Type of Service: Amps: _____ Voltage: _____ Phase: _____ U/G O/H
Detailed Description of Work:

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

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 and reside or plan to reside in 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 / Receipt Number _____

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

Name of Cardholder: _____ Signature of Cardholder: _____

Privacy Disclosure:
 "The personal information provided as part of this application is collected under the Safety Codes Act and the Municipal Government Act and in accordance with the Freedom of Information and Protection of Privacy 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, use or disclosure of the personal information provided, please contact the FOIP Coordinator at 780-963-2151."

**INSPECTION REQUESTS please contact Superior Safety Codes at:
 Ph. 780.489.4777 or 1.866.999.4777
 Allow 48 hours notice for inspection**