

Electrical Permit Application

Park Enterprises Ltd. #10, 491 W.T. Hill Blvd, Lethbridge, AB T1J 1Y6 Phone: 1(800) 621-5440

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Email: contact@parkenterprises.ca **Permit Applicant:** □Owner □Contractor Application Date (mm/dd/yyyy): ___ Estimated Start Date (mm/dd/yyyy): Development Permit No. (if applicable):_____ Estimated Completion Date (mm/dd/yyyy):_____ Value of Work (labour & materials):___ Building Permit No. (if applicable): Owner Name (printed): Province:_____ Postal Code:____ Mailing Address: _____ City/Town/Village: Owners Phone #: *Email: Fax #: Contracting Company Name (printed): Contact Name (printed): ___ City/Town/Village: Province: Postal Code: Mailing Address: *Email: Owners Phone #:_____ Project Location Municipality: Subdivision/ Hamlet Name: _____ Tax Roll No.:___ Street/ Rural Address: * Legal land description is required Plan: LSD: Quarter: Section: Township: Range: West of: Lot: _____ Block: ____ 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 ISSUED / WORK MUST BE INSPECTED BEFORE COVERING TYPE OF OCCUPANCY **TYPE OF WORK** SERVICE AND INSTALLATION AREA ☐Single Family Residential □New □ Overhead □ Underground ☐ Multi-Family Residential □Addition Amps: _____ Volts: ____ Phase: ____ # of units: ☐Renovation/Alteration (interior) ☐ Agricultural (Farm) □Feet² □Meters² ☐ Installation of Service (panel/meter/ service upgrade) □ Commercial \square Service Connection (energizing the site/ mobile home/ building/ Ground Floor: □Industrial equipment) 2nd Floor (loft/ mezzanine): _____ ☐ Improvements (A/C/ hot tub/ basement development/ etc.) □Institutional Basement Development: □Yes □No ☐ Temporary Service □ Other (specify): Garage/ Shop: □Attached □Detached _____ ☐Annual Permit □ Alternative Energy Other (specify): □Solar □Wind □Other (specify): _____ ☐Other (specify):___ Total Installation Area: 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 Park Enterprises at 403-329-3747 or #10 – 491 W.T. Hill Blvd South, Lethbridge T1J 1Y6. Certification No. Master Electrician Name (please print) Master Electrician Signature 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 □ Plumbing □ Gas □ Private Sewage □ Not Applicable [Received Date Stamp] Permit Fee: \$_ SCC Levy: \$__ (\$4.50 or 4% of the permit fee maximum \$560.00) Travel Fee: \$___ Total Cost: \$ eSITE Permit No.: Receipt No.: □Invoiced □Cash □Cheque □Debit Agency File No.:

□ Credit Card □ Visa □ MC (attach signed credit card authorization form)

^{*} Email address fields and legal land description are required to be completed. Please go to parkenterprises ca for FAQs and application checklists.