



Building Permit Application

Park Enterprises Ltd.
#10, 491 W.T. Hill Blvd,
Lethbridge, AB T1J 1Y6
Phone: 1(800) 621-5440
Fax: 1(866) 406-8484
Email: contact@parkenterprises.ca

Permit Applicant: ☐ Owner ☐ Contractor Application Date (mm/dd/yyyy): _____ Development Permit No. (if applicable): _____ Builder License ID No. (if applicable): _____	New Home Warranty No. (if applicable): _____ Estimated Start Date (mm/dd/yyyy): _____ Estimated Completion Date (mm/dd/yyyy): _____ Value of Work (labour & materials): _____
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Owner Name (printed): _____			
Mailing Address: _____	City/Town/Village: _____	Province: _____	Postal Code: _____
*Email: _____	Owners Phone #: _____	Fax #: _____	

Contracting Company Name (printed): _____		Contact Name (printed): _____	
Mailing Address: _____	City/Town/Village: _____	Province: _____	Postal Code: _____
*Email: _____	Owners Phone #: _____	Fax #: _____	

Project Location			
Municipality: _____	Subdivision/ Hamlet Name: _____	Tax Roll No.: _____	
Street/ Rural Address: _____		Unit: _____	
*Legal land description is required			
Lot: _____	Block: _____	Plan: _____	LSD: _____ Quarter: _____ Section: _____ Township: _____ 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 ISSUED / WORK MUST BE INSPECTED BEFORE COVERING
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TYPE OF OCCUPANCY	TYPE OF WORK	BUILDING AREA
☐ Single Family Residential ☐ Multi-Family Residential # of units: _____ ☐ Commercial ☐ Industrial ☐ Institutional ☐ Other (specify): _____	☐ New ☐ Addition ☐ Renovation ☐ Basement Development ☐ Swimming Pool/ Hot Tub ☐ Change of Occupancy/ Use ☐ Roof Mounted Solar Panel ☐ Temporary Structure – Removal Date: _____ ☐ Manufactured/ RTM Home – Foundation Type: _____ Indicate: ☐ New or ☐ Relocation Year of Manufacture: _____ CSA/ QAI/ Intertek No.: _____ AMA No.: _____ ☐ Attached Garage ☐ Shed ☐ Secondary Suite ☐ Deck ☐ Demolition ☐ Relocatable Industrial ☐ Detached Garage ☐ Shop ☐ Seasonal Cabin	☐ Feet² ☐ Meters² Ground floor Area: _____ 2nd Floor Area (loft/ mezzanine) : _____ Basement Floor Area: _____ Developed: ☐ Yes ☐ No: _____ Garage: _____ Deck: _____ Other (specify) : _____ Total Developed Area: _____ Undeveloped Area: _____ # of Stories: _____

FOIP Notification: The personal information required by the Town of Vauxhall application forms is collected under the authority of section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act and section 63 of the Safety Codes Act. It will be used for processing permit applications, issuing permits, safety codes compliance monitoring and verification. The name of the permit holder and nature of the permit may be included on reports provided to the municipality or made available to the public as required or allowed by legislation. Please direct any questions about this collection to the Town of Vauxhall at 403-654-2174 or 223 5 Street North, Vauxhall T0K 2K0.

Permit Applicant's Name (please print) _____	Permit Applicant's 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 ☐ Plumbing ☐ Electrical ☐ Gas ☐ Private Sewage ☐ Not Applicable Permit Fee: \$ _____ SCC Levy: \$ _____ (\$4.50 or 4% of the permit fee maximum \$560.00) Travel Fee: \$ _____ Total Cost: \$ _____ Receipt No.: _____ ☐ Invoiced ☐ Cash ☐ Cheque ☐ Debit ☐ Credit Card ☐ Visa ☐ MC (attach signed credit card authorization form)	[Received Date Stamp] eSITE Permit No.: _____ Agency File No.: _____

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