

Alberta Safety Codes Authority

## **Electrical 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

Development Permit No. (if applicable):		Estimated Co	stimated Start Date (mm/dd/yyyy):stimated Completion Date (mm/dd/yyyy):salue of Work (labour & materials):	
Owner Name ( ) ( )				
Owner Name (printed):		ty/Town/Village: Owners Phone #:	Province:Postal Code:	
Contracting Company Name (printed): Contact Name (printed):				
Mailing Address: City/Town/Village:				
*Fmail:	Owners Phone #:		110VIII00:110Stat 00000:	
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:	Plan: LSL	7: Quarter: Se	ection: lownship: Range: West of:	
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 WO	)RK	SERVICE AND INSTALLATION AREA	
☐Single Family Residential	□New		□Overhead □Underground	
☐Multi-Family Residential	□Addition			
# of units:	☐Renovation/Alteration (interior)		Amps: Volts: Phase:	
☐ Agricultural (Farm)	☐ Installation of Service (panel/meter/ service upgrade)		□Feet² □Meters²	
□ Agriculturar (r arm) □ Commercial	,			
	□ Service Connection (energizing the site/ mobile home/ building/		Ground Floor:	
□Industrial	equipment)		2 <sup>nd</sup> Floor (loft/ mezzanine):	
□Institutional	☐Improvements (A/C/ hot tub/ basement development/ etc.)		Basement Development: □Yes □No	
□Other (specify):	☐Temporary Service			
	□Annual Permit		Garage/ Shop: □Attached □Detached	
	☐Alternative Energy			
	□Solar □Wind □Other (specify):		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 ASCA Coordinators at 1-888-413-0099 or at Suite 500, 10405 Jasper Avenue, Edmonton, AB T5J 3N4.				
Master Electrician Name (please print)  Certification No.		Master Electrician Signature		
<del></del>				
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: \$			OITE Dame 4 No.	
Receipt No.:			eSITE Permit No.:	
☐ Invoiced ☐ Cash ☐ Cheque ☐ Debit			Agency File No.	
□Credit Card □Visa □MC (attach signed credit card authorization form)			Agency File No.:	