

A Division of the Safety Codes Council

**PLUMBING PERMIT APPLICATION FORM**

Development Permit No.: \_\_\_\_\_ Other Permits Required (under separate application):  Building  Electrical  Gas  PSDS  
 Application Date (mmm/dd/yyyy): \_\_\_\_\_ Estimated Project Completion Date (mmm/dd/yyyy): \_\_\_\_\_  
 Permit Applicant:  Owner  Contractor Value of Installation (labour and material): \$ \_\_\_\_\_

Owner Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Cell: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Company Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Contractor Name: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Project Location: Municipality: \_\_\_\_\_ Subdivision Name: \_\_\_\_\_ Tax Roll No.: \_\_\_\_\_  
 Street/Rural Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_ Legal Subdivision: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ West of: \_\_\_\_\_

Directions: \_\_\_\_\_

Description of Work:  Work has not started  Work is in progress  Work is complete

TYPE OF OCCUPANCY	TYPE OF WORK	NUMBER OF FIXTURES	
<input type="checkbox"/> Single Residential <input type="checkbox"/> Multi-family <input type="checkbox"/> Farm/Ranch <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Manufactured/Mobile Home <input type="checkbox"/> Oil and Gas <input type="checkbox"/> Skid Units <input type="checkbox"/> Other: _____	<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Renovation <input type="checkbox"/> Accessory Building <input type="checkbox"/> Ready to Move <input type="checkbox"/> Basement Development <input type="checkbox"/> Service Connection <input type="checkbox"/> Other: _____	Kitchen Sinks: _____ Basins: _____ Showers: _____ Laundry Tubs: _____ Toilets: _____ Washing Machine: _____	Bathtubs: _____ Floor Drains: _____ Grease Traps: _____ Bidets/Water Fountains: _____ Urinals: _____ Other Fixtures: _____ Total: _____
		Total Footprint: _____ <input type="checkbox"/> ft <sup>2</sup> <input type="checkbox"/> m <sup>2</sup>	

**FOIPP Notification:** The personal information required by Alberta Safety Codes Authority (ASCA) 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 a municipality or made available to the public as required or allowed by legislation. Personal information may also be used by ASCA to conduct ongoing evaluations of the services provided by its service providers to permit applicants, permit holders and owners. Please direct any questions about this collection to ASCA FOIPP Coordinator at General Inquiries at 1-877-413-6725 or at Suite 1000, 10665 Jasper Avenue, Edmonton, AB T5J 3S9.

Journeyman's Name (print) \_\_\_\_\_ Journeyman's Signature \_\_\_\_\_ Homeowner's Signature (homeowner permit only) \_\_\_\_\_  
 Journeyman's Certification No.: \_\_\_\_\_ Homeowner Declaration: By signing this application I hereby certify that I own/will own and occupy this dwelling.

**Office Use Only**

Permit Fee: \$ \_\_\_\_\_ SCC Levy: \_\_\_\_\_ Issuing Officer's Name: \_\_\_\_\_  
 Total Cost: \$ \_\_\_\_\_ (\$4.50 or 4% of the permit fee maximum \$560.00) Issuing Officer's Signature: \_\_\_\_\_  
 Receipt No.: \_\_\_\_\_ Designation No.: \_\_\_\_\_  
 Cash  Debit  Cheque \_\_\_\_\_ Permit Issue Date (mmm/dd/yyyy): \_\_\_\_\_  
 Credit Card (attach signed credit card authorization form)