



PERMIT LABEL

ESITE #: 333333 _____

HOMEOWNER ELECTRICAL PERMIT APPLICATION

Application Date: _____

Development Permit # _____

Property Owner Name: _____
 Mailing Address: _____ City: _____ Prov: _____ Postal Code: _____
 Phone: _____ Cell: _____
 E-mail: _____

PROJECT LOCATION:

Municipal Address: _____
 Legal Address: Lot/Unit _____ Block _____ Plan _____
 Subdivision Name (if applicable) _____ Tax Roll # _____
 Directions/Comments: _____

PROJECT INFORMATION:

Estimated Start Date: _____ Estimated Completion Date: _____

TYPE OF OCCUPANCY	TYPE OF WORK	DESCRIPTION OF WORK
<input type="checkbox"/> Residential <input type="checkbox"/> Other: _____ _____ _____	<input type="checkbox"/> New Construction <input type="checkbox"/> Renovation <input type="checkbox"/> Service Connection Only <input type="checkbox"/> Alteration <input type="checkbox"/> Other: _____ _____ _____	Service Type: <input type="checkbox"/> New <input type="checkbox"/> Temporary Supply Service Required: <input type="checkbox"/> Yes <input type="checkbox"/> No Type of Supply Service: <input type="checkbox"/> Overhead <input type="checkbox"/> Underground <input type="checkbox"/> Temporary <input type="checkbox"/> Pad Transformer Volts: _____ Amps: _____ Phase: _____ Total Developed Area: _____ Value (Labour & Materials): \$ _____

DESCRIPTION OF WORK: _____

APPLICANT DECLARATION: I certify that the installation will be completed in accordance with the Alberta Safety Codes Act and Regulations and will commence within 90 days.

HOMEOWNER DECLARATION: As the homeowner, I declare that I am the registered owner of the property where the installation will take place, that I live at or will live at the project address and that I do not rent this property and that construction will not interfere with the electrical, plumbing or gas projects of adjacent properties. I am doing the work myself and assume responsibility for compliance with the applicable Act and Regulations.

I have read and understand the homeowner declaration:

APPLICANT NAME (PRINT): _____ **SIGNATURE:** _____

For Office Use Only: (SSCI\$ _____ + Town \$ _____) = Permit Fee \$ _____ + SCC Levy \$ _____ = TOTAL FEE \$ _____

Submit permit applications to The Town of Vulcan
 321-2nd Street South – Box 360 – Vulcan AB T0L 2B0 – Phone 403-485-2417/Fax 403-485-2914/email admin@townofvulcan.ca – www.townofvulcan.ca
 For inspections, please contact Superior Safety Codes at
 #25, 2015 – 32 Avenue N.E. Calgary, AB T2E 6Z3 – Phone 1-888-717-2344/Fax 1-888-717-2340
www.superiorsafetycodes.com

The personal information provided as part of this application is collected under section 43 of the Safety Codes Act and sections 303 and 295 of the Municipal Government Act and in accordance with section 32(c) of 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 or use of the personal information provided, please contact The Town of Vulcan at (403)485-2417