



# Plumbing Permit Application

PERMIT

**IJD INSPECTIONS LTD. E4, 5560 45 ST. RED DEER, AB T4N 1L1**

**PERMIT APPLICANT:**  Contractor  Homeowner

**Owner Name** \_\_\_\_\_ **Daytime Phone** \_\_\_\_\_  
**Mailing Address** \_\_\_\_\_ **City/Town** \_\_\_\_\_ **Postal Code** \_\_\_\_\_  
**Fax** \_\_\_\_\_ **Email** \_\_\_\_\_

**Contractor** \_\_\_\_\_ **Daytime Phone** \_\_\_\_\_  
**Mailing Address** \_\_\_\_\_ **City/Town** \_\_\_\_\_ **Postal Code** \_\_\_\_\_  
**Fax** \_\_\_\_\_ **Email** \_\_\_\_\_  
**Journeyman Name** \_\_\_\_\_ **Journeyman #** \_\_\_\_\_

*Permit Applicant Declaration: The permit applicant certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations and work will commence within 90 days. Homeowner applicants affirm that they are the owner of the premises in which the work will be conducted and reside on the property. The personal information provided on this form is protected by the Freedom of Information and Protection of Privacy Act.*

**APPLICANT NAME:** \_\_\_\_\_ **APPLICANT SIGNATURE:** X \_\_\_\_\_

**Municipality:** \_\_\_\_\_ **Street Address:** \_\_\_\_\_  
**Rural Address (" R O "):** \_\_\_\_\_  
**Lot:** \_\_\_\_\_ **Block:** \_\_\_\_\_ **Plan:** \_\_\_\_\_ **Subdivision:** \_\_\_\_\_  
**Legal subdivision: Part of** \_\_\_\_\_ **Section** \_\_\_\_\_ **Township** \_\_\_\_\_ **Range** \_\_\_\_\_ **West of** \_\_\_\_\_

**Description of Work:** \_\_\_\_\_  
**Intended Use:**  Residential  Commercial  Industrial  Farm  Other: \_\_\_\_\_  
**Type of Work:**  New  Renovation  MFD Home or RTM on basement /crawlspce  MFD Home or RTM on piles/ blockings  
# Sinks \_\_\_\_\_ # Basins \_\_\_\_\_ # Showers \_\_\_\_\_ # Laundry \_\_\_\_\_ # Toilets \_\_\_\_\_  
# Washing Machines \_\_\_\_\_ # Bathtubs \_\_\_\_\_ # Floor Drains \_\_\_\_\_ # Sewage Sumps \_\_\_\_\_  
# Urinals \_\_\_\_\_ # of Drops (MFD Homes/RTMs) \_\_\_\_\_ # Other \_\_\_\_\_  
**TOTAL FIXTURES** \_\_\_\_\_

**Permit Validation Section:**  
Special Conditions: \_\_\_\_\_  
General Conditions: This Permit expires if the undertaking to which it applies;  
-is not commenced within 90 days from the date of issue of the permit,  
-is suspended or abandoned for a period of 120 days, or  
-is in respect of a seasonal use residence and the undertaking is suspended or abandoned for a period of 240 days after the undertaking is started.

Issuing S.C.O. Name \_\_\_\_\_ S.C.O. Designation # \_\_\_\_\_ S.C.O. Signature \_\_\_\_\_ Date of Issue \_\_\_\_\_

<b>PERMIT FEE</b>		Payment Method: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Cheque <input type="checkbox"/> Cash <input type="checkbox"/> Debit <input type="checkbox"/> Other
<b>SCC LEVY</b>		Credit Card # _____ Exp. ____/____
<b>TOTAL FEE</b>		Purchase Order # _____ <b>This is your Invoice</b>
		Card Holder's Signature: X _____