

Electrical Permit Application

Permit Type: ☐ Owner ☐ Contractor

Application Date (M/D/Y): _____

eSITE Permit Number: 305305 - _____

Building Permit Number: _____

Estimated Completion Date (M/D/Y): _____

Owner: _____ Mailing Address: _____
City: _____ Prov.: _____ Postal Code: _____ Phone: _____
Cell Number: _____ Fax: _____ Email Address: _____

Contractor: _____ Mailing Address: _____
City: _____ Prov.: _____ Postal Code: _____ Phone: _____
Cell Number: _____ Fax: _____ Email Address: _____

Street or Rural Address: _____ Subdivision or Hamlet Name: _____
Unit #: _____ Lot: _____ Block: _____ Plan: _____ Tax Roll #: _____
Legal Subdivision: Part of: _____ 1/4 Sect: _____ Twp: _____ Rge: _____ W of: _____
Directions: _____

Type of Service: Amperes: _____ Voltage: _____ Phase: _____ Underground Overhead

Type of Building:

- ☐ Residential
☐ Farm
☐ Commercial
☐ Multi-Family
☐ Industrial
☐ Institutional

Type of Work:

- ☐ New ☐ Renovation
☐ Addition ☐ Basement
☐ Dev. Temp Service
☐ Accessory Building
☐ Connection Only
Other _____

Area Being Developed:

Main Floor: _____ sq. ft.
2nd Floor: _____ sq. ft.
Developed
Basement: _____ sq. ft.
Garage: _____ sq. ft.
☐ Detached ☐ Attached
Total Developed: _____ sq. ft.

Detailed Description of Work:

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. The permit applicant/owner acknowledges that as per Section 12(2) of the Alberta Safety Codes Act; Superior Safety Codes Inc. is not liable for any decision related to the system of inspections, examinations, evaluations and investigations including but not limited to a decision relating to their frequency and the manner in which they are carried out. The personal information provided on this form is protected by the Freedom of Information of Privacy Act.

Master's Name (Please print) _____

Master's Signature _____

Homeowner's Signature (Homeowner permits only) _____

Master's Certification Number _____

**Homeowner Declaration: By signing this permit I hereby
certify that I own or will own and occupy this dwelling.**

Project Value (Materials & Labour): \$ _____

PERMIT FEES ARE NON REFUNDABLE

Permit Fee: \$ _____ *SCC Levy: \$ _____ TOTAL FEE: \$ _____

***SCC Levy is 4% of the permit fee with a
minimum of \$4.50 and a maximum of \$560**

Payment Method: ☐ Visa ☐ M/C ☐ Debit ☐ Cheque ☐ Cash RECEIPT NUMBER: _____

Please be advised that any information provided to Sturgeon County (the "County") in order to process your application is subject to the application of the Access to Information Act (ATIA) and may be used and disclosed in accordance with the legislation. Specifically, all documents and studies required to be prepared and submitted by the applicant to the County are deemed to be publicly available and the property of the County once they are submitted to the County to process the application. Unless the submitting party explicitly indicates, in advance and clearly on the face of the record, that certain parts of the information are provided in confidence to the County and are to remain confidential, all documents and studies submitted to the County may be subject to disclosure under the ATIA. If confidentiality is required, it is the responsibility of the submitting party to clearly mark such records as Confidential and provide written rationale for the request. Should the applicant provide the County with such a declaration of confidentiality, the County will take this under consideration to determine if the document and/or study can be accepted in confidence; however, the County cannot guarantee that such information will remain confidential and will not be subject to disclosure pursuant to the ATIA.

Permit Validation Section to be completed by the Permit Issuer:

Special Conditions: _____

SCO's Name (print or type) _____ SCO's Signature _____

SCO's Designation Number _____ Date of Issue (M/D/Y): _____

M/C or Visa Number _____ Expiry Date: _____

Name (as it appears on card): _____ Authorized Signature: _____