

Permit Type: [] Owner [] Contractor New Home Buyer Protection Act Registration Number (NHBPA): _____
Builders License Number: _____
Estimated Start Date: _____
Estimated Completion Date: _____

When your permit is ready do you want us to: [] call you for pick up [] mail it [] fax [] email

Owner Name: _____ Mailing Address(City, Province, Postal Code): _____
Contractor Name: _____ Mailing Address(City, Province, Postal Code): _____
Phone: _____ Alternate Phone: _____ Fax: _____ Email: _____

Legal(circle): NE NW SE SW Section _____ Township _____ Range _____ W4 Subdivision: _____
Lot _____ Block _____ Plan _____ Rural Address: _____

Project Information Type of Work Roll #
[] Commercial [] New [] Manufactured Home
[] Residential [] Addition [] RTM (Ready to Move)
[] Industrial [] Renovation [] Other: _____
[] Institutional [] Accessory Building
[] Oil & Gas [] Basement Development

Description of Work: _____

Main Area: _____ Basement Area: _____ Developed [] yes [] no
2nd Floor: _____ Garage Area: _____ [] Attached [] Detached
No. of Stories _____ Total Developed Area: _____ [] Sq. Meters [] Sq. feet

Project Value (please include both labour & materials) \$ _____

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 owner/contractor 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 and Protection of Privacy Act. The permit applicant acknowledges this permit will expire in one (1) year unless extended in writing by a Safety Codes Officer or the Development Authority

Permit Applicant Name (print) Permit Applicant Signature Homeowner Signature Date (M/D/Y)

Permit Fee \$ _____ *SCC Levy \$ _____ Total Fee \$ _____ Receipt _____

Permit Validation Section to be completed by the Safety Codes Officer
Special Conditions: _____
SCO's Name (print) SCO's Designation # SCO's Signature Date of Issue (M/D/Y)

*See Fee Schedule

If permit is cancelled prior to 6 months of the issue date the County will keep 25% of the permit fee to cover costs. After 6 months or if the permit has expired no refund will be given.