



Village of Boyle
 4800 – 3rd Street South
 PO Box 9
 Boyle, AB T0A 0M0
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 Fax: (780) 689-3998
 www.boylealberta.com

The Inspections Group Inc.
 12010 – 111 Avenue NW
 Edmonton, AB T5G 0E6
 Phone: (780) 454 5048 / (866) 554 5048
 Fax: (780) 454 5222 / (866) 454 5222
 www.inspectionsgroup.com

ELECTRICAL PERMIT APPLICATION FORM

Development Permit: _____

Municipality #: _____

Application Date: DD / MMM / YYYY

Estimated Project Completion Date: DD / MMM / YYYY

Applicant Type: Homeowner Contractor

Cost of Installation (Labour & Material) \$ _____

The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act. A permit may expire if the undertaking to which it applies: (a) is not commenced within 90 days of issue of the permit, (b) is suspended or abandoned for a period of 120 days. An extension can be considered when applied for in writing prior to permit expiry date.

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

Owner's Signature / Declaration (Single Family Residential Only)

"I hereby declare I am the owner of the premises in which the work will be conducted, and reside or will reside on the property. I am doing the work myself, and assume responsibility for compliance with the applicable Act and Regulations"

Company Name: _____ Mailing Address: _____
 City: _____ Prov: _____ Postal Code: _____ Phone: _____ Fax: _____
 Cell: _____ Email: _____
 _____ Master Electrician Number _____ Master Electrician Name _____ Master Electrician Signature _____

Project Location in The Village of Boyle:

Street Address: _____
 Legal Subdivision: Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____
 Subdivision Name: _____ Lot: _____ Block: _____ Plan: _____
 Directions: _____

BUILDING TYPE:

- Single / Multi Family Dwelling
- Commercial
- Residential
- Industrial
- Institutional
- Square Feet: _____

TYPE OF WORK:

- New Work
- Renovation
- Connection
- Temporary Service
- Other

SERVICE INFORMATION:

- Does this installation Require a Service Connection
 Yes No
- SUPPLY SERVICE:** Overhead Underground
- Service Information: Amps: _____
 Volts: _____
 Phase: _____

Description of Work: _____

Payment Type: Cash Cheque Other
 Permit Fee: \$ _____
 + SCC Levy*: \$ _____
 Total Cost: \$ _____ Receipt #: _____

AUTHORIZATION

Issuing Officer's Name: _____
 Issuing Officer's Signature: _____
 Designation Number: _____
 Permit Issue Date: DD / MMM / YYYY

*\$4.50 or 4% of the permit fee maximum \$560.00

PLEASE CONTACT THE INSPECTIONS GROUP INC. PRIOR TO DRYWALL FOR INSPECTIONS ALLOWING TWO WORKING DAYS NOTICE AND PROVIDE SAFE ACCESS.
 The personal information provided as part of this application is collected under the Safety Codes Act and the Municipal Government Act and in accordance with 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 Municipality.