

Which permit type are you applying for?  water/sewer  interior plumbing  other \_\_\_\_\_

Property address \_\_\_\_\_ Subdivision \_\_\_\_\_

Legal description Lot \_\_\_\_\_ or Condo unit \_\_\_\_\_ Block \_\_\_\_\_ Plan \_\_\_\_\_

 (if applicable) Quarter \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ Meridian 4

 When your permit is ready do you want us to:  contact you for pick up  mail permit  email permit  fax permit

**Applicant name(s)** \_\_\_\_\_ **Contact name** \_\_\_\_\_

Applicant address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal code \_\_\_\_\_

Phone number \_\_\_\_\_ Alternate phone \_\_\_\_\_ Fax \_\_\_\_\_

email address \_\_\_\_\_

**Building type**  residential ► sq ft \_\_\_\_\_  industrial  institutional  
 commercial  other ► \_\_\_\_\_

 Landowner name \_\_\_\_\_ Tenant name \_\_\_\_\_  
 (If different than applicant) (If commercial, industrial, institutional, or other)

 Proposed installation will take place in **conjunction** with  new construction  building renovation

Description of work \_\_\_\_\_

 If application is for **water connection permit**
 Water line length \_\_\_\_\_ feet Water supplied by:  municipal system  cistern  well

 If application is for **sewer connection permit**
 Sewer line length \_\_\_\_\_ feet Sanitary line connected to:  municipal sewer  private sewage disposal

 If application is for **interior plumbing permit**

Fixture	Number	Fixture	Number	Fixture	Number
automatic washer standpipe		kitchen sink		interceptor	
laundry tub		sewer backwater valve		potable water backflow device	
bar sink		floor drain		double check valve assembly	
bath tub		hose bib		reduced principle backflow preventer	
shower		hot water tank		other	
lavatory		mop sink			
toilet		janitor sink			

Total fixtures \_\_\_\_\_

**Contractor declaration** (if contractor is applying)

I hereby certify that this installation will be completed in accordance with the applicable Act and Regulations.

**Homeowner declaration** (if homeowner is applying)

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

Journeyman name \_\_\_\_\_ Journeyman number \_\_\_\_\_

Owner's signature \_\_\_\_\_

**Collection and use of personal information**

 Personal information is collected under the authority of s. 33(c) of the *Freedom of Information and Protection of Privacy Act* and will be used in the management and administration of Strathcona County's planning and permitting processes. Information related to your permit application and/or permit(s) issued may be disclosed as allowed or required by law. If you have any questions about the collection, use or disclosure of your personal information, contact the Building Services Coordinator at 780-464-8080.

**For office use only**

 Plumbing \_\_\_\_\_  
 SCC \_\_\_\_\_  
 Total \_\_\_\_\_  
 Receipt no. \_\_\_\_\_

 Date received \_\_\_\_\_  
 Received by \_\_\_\_\_

 Roll number \_\_\_\_\_  
 Application No. \_\_\_\_\_  
 Entered by \_\_\_\_\_  
 Date entered \_\_\_\_\_

**Conditions**

- 1 **Act**  
The issuance of a Permit shall not prevent a Safety Codes Officer from issuing a correction notice if a plumbing installation or part thereof is found not to be in accordance with the Safety Codes Act, regulations, and bylaws.
- 2 **Deviation**  
No deviation from the plans, specifications or information contained on the application for this Permit shall be permitted without prior written authorization from the Safety Codes Officer.
- 3 **Expiry**  
This Permit expires one year from the date of issue.
- 4 **Safety Codes Officer**  
The person authorized to perform plumbing installations governed by this Permit shall notify the Safety Codes Officer prior to concealment of any portion of the installation.
- 5 **Location of utilities**  
Before excavation is started, check for the location of utilities.
- 6 **Inspection**  
The permit applicant shall contact the Safety Codes Officer to arrange for the following required inspections: groundwork rough-in prior to covering, and above ground rough-in prior to covering.
- 7 **Important notice**  
If any portion or part of the work is concealed prior to an approval by a Safety Codes Officer, all work may be requested to be uncovered.
- 8 **Re-inspection**  
Any required re-inspection may be subject to a re-inspection fee, as per the current fee schedule. This fee is required to be paid before to the re-inspection takes place.
- 9 **Offence**  
Any person who commits a breach of any of the provisions of the Safety Code Act, or Regulations made pursuant thereto, or of the conditions of a Permit, is guilty of an offence under the Act.
- 10 **Approval**  
Neither the examination of plans and specifications nor the issuance of a permit shall be construed to be an approval of any installation made or done in contravention of any provision(s) of a bylaw, an agreement or the Safety Codes Act or regulations. Satisfactory inspections are required for final approval.

**Payment information** - The information below is collected and will only be used to make the authorized credit card payment for this approved one-time amount. The information will only be copied, distributed or otherwise disclosed with prior approval. This information will be processed and then immediately destroyed.

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If the completed application is being **mailed or delivered**, please complete the following:

<input type="checkbox"/> Receipt Required		Total Payment Submitted \$
Paying by: <input type="checkbox"/> Cheque <input type="checkbox"/> AMEX <input type="checkbox"/> Master Card <input type="checkbox"/> Visa (Postdated cheques are not accepted)		Cardholder Name
Card Number	Expiry Date	Signature

If the completed application is being **emailed**, please do not complete the credit card information, instead our staff will contact you for payment. As a PCI compliant organization, **we cannot accept credit card information through email.**