



4924 - 47 Street | Box 397 • Redwater, AB T0A 2W0  
 Phone: 780-942-3519 • Fax: 780-942-4321  
 www.redwater.ca

File Label

## GAS PERMIT APPLICATION

Permit Type:  Owner  Contractor

Application Date (M/D/Y): \_\_\_\_\_

eSITE Permit #: \_\_\_\_\_

Development Permit #: \_\_\_\_\_

Estimated Completion Date (M/D/Y): \_\_\_\_\_

<b>Owner Name:</b> _____ <b>Mailing Address:</b> _____ <b>City:</b> _____ <b>Prov:</b> _____ <b>Postal Code:</b> _____ <b>Phone:</b> _____ <b>Cell Phone:</b> _____ <b>Fax:</b> _____ <b>Email Address:</b> _____ <b>SIGNATURE:</b> _____ <p style="text-align: center;"><b>Homeowner/Owner Permits (Residential Only)</b>  <i>Homeowner Declaration: By signing this permit I hereby certify that I own or will own and occupy this dwelling.</i></p>	<b>Contractor Name:</b> _____ <b>Mailing Address:</b> _____ <b>City:</b> _____ <b>Prov:</b> _____ <b>Postal Code:</b> _____ <b>Phone:</b> _____ <b>Cell Phone:</b> _____ <b>Fax:</b> _____ <b>Email Address:</b> _____ <b>Gasfitter Name:</b> _____ <b>Journeyman Gasfitter Certification Number:</b> _____ <b>SIGNATURE:</b> _____
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**Permit Applicant Declaration:** The permit applicant certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations. 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 Town of Redwater at 780.942.3519.

**PROJECT LOCATION: TOWN OF REDWATER**

**Street Address:** \_\_\_\_\_ **Subdivision Name:** \_\_\_\_\_  
**Unit or Suite #:** \_\_\_\_\_ **Lot:** \_\_\_\_\_ **Block:** \_\_\_\_\_ **Plan:** \_\_\_\_\_ **Tax Roll #:** \_\_\_\_\_  
**Legal Subdivision:** Part of: \_\_\_\_\_ ¼ Sect: \_\_\_\_\_ Twp: \_\_\_\_\_ Rge: \_\_\_\_\_ W of: \_\_\_\_\_

**PROJECT INFORMATION:**  Commercial  Residential  Multi Family  Industrial  Institutional  
**TYPE OF WORK:**  New  Renovation  Addition  Accessory Building  Basement Development  Replacement  Temp Heat  
 Manufactured Home  Secondary Suite  Other \_\_\_\_\_

**Detailed Description of Work:**  
 \_\_\_\_\_  
 \_\_\_\_\_

**Type of Gas:**  Natural Gas  Propane **Name of Gas/Propane Supplier:** \_\_\_\_\_  
**# Furnaces:** \_\_\_\_\_ **# Water Heaters:** \_\_\_\_\_ **# Fireplaces:** \_\_\_\_\_  
**# Dryers:** \_\_\_\_\_ **# Boilers:** \_\_\_\_\_ **# Unit Heaters:** \_\_\_\_\_  
**# BBQ's:** \_\_\_\_\_ **# Ranges:** \_\_\_\_\_ **# Other Outlets:** \_\_\_\_\_  
**# Secondary Gas Lines:** \_\_\_\_\_ **Total # of Outlets:** \_\_\_\_\_  
**BTU Input (Non-residential):** \_\_\_\_\_

**Propane Tank Sets:**  New  Existing  
**Number of Tank Sets:** \_\_\_\_\_  
**Tank Size:** \_\_\_\_\_  
**Serial Number(s):** \_\_\_\_\_

**PERMIT FEES & PAYMENT INFORMATION**

**Project Value (Materials & Labour):** \$ \_\_\_\_\_ **Inspecting SCO:** \_\_\_\_\_  
**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 **Authorization / Cheque Number** \_\_\_\_\_  
**Credit Card #:** \_\_\_\_\_ **Expiry Date:** \_\_\_\_\_ **Date of Authorization:** \_\_\_\_\_  
**Name of Cardholder:** \_\_\_\_\_ **Signature of Cardholder:** \_\_\_\_\_



**INSPECTION REQUESTS please contact Superior Safety Codes at:**  
 Ph. 780.489.4777 or 1.866.999.4777  
 Allow 48 hours' notice for inspection