

## PLUMBING AND GAS PERMIT APPLICATION

PROJECT Number: \_\_\_\_\_

DATE: \_\_\_\_\_

COMBO Project Number: \_\_\_\_\_

<b><u>CONTRACTOR INFORMATION:</u></b>	<b>CITY CUSTOMER ID # (if known)</b> _____
CONTRACTOR'S COMPANY NAME: _____	
CONTRACTOR'S ADDRESS: _____ Postal Code _____	
PHONE NUMBER: _____ CELLULAR: _____ FAX: _____	
EMAIL: (mandatory) _____ (Inspection results are sent to this email)	
NOTE: Safety Code Officers entering into any worksite (including occupied homes) are required to wear approved footwear for safety reasons.	
CONTRACTOR'S SIGNATURE: _____	

Personal Information required by City of Edmonton application forms is collected under authority of sections 33(a) and (c) of the Alberta Freedom of Information and Protection of Privacy (FOIP) Act. Your personal information will be used to process your application(s). Please be advised that your name, address and details related to your permit may be included on reports that are available to the public as required or allowed by legislation. If you have any questions, please contact a Service Advisor at the Edmonton Service Centre at 780-442-5054.

<b><u>WORK SITE INFORMATION:</u></b>	
WORK SITE ADDRESS: _____	FLOOR NO: _____
BAY NO: _____	PROJECT NAME: _____
JOB SITE CONTACT: NAME _____	PHONE NUMBER: _____
BUILDING USE: <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> MULTI FAMILY Dwellings <input type="checkbox"/> RESIDENTIAL Dwellings <small>(Single Detached Dwellings Only)</small>	
<input type="checkbox"/> RELOCATABLE STRUCTURE – MANUFACTURED TRAILER UNIT # _____	

<b><u>JOB INFORMATION:</u></b>	
TYPE OF WORK: <input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> REPLACEMENT <input type="checkbox"/> ALTERATION <input type="checkbox"/> RETEST <input type="checkbox"/> TEMPORARY GAS HEAT	

TYPE OF INSTALLATION: <input type="checkbox"/> GAS <input type="checkbox"/> COMBO MECHANICAL <input type="checkbox"/> PLUMBING <input type="checkbox"/> SPRINKLER SYSTEM	
<input type="checkbox"/> PROPANE <input type="checkbox"/> BOILER (Commercial) <input type="checkbox"/> SEWER & WATER <input type="checkbox"/> FURNACE	
OWNER / OCCUPANT: _____	PHONE NUMBER: _____

<input type="checkbox"/> <b>Private Sewage Disposal System</b>			<input type="checkbox"/> <b>Disposal System Application Required</b>		
GAS SERVICE	NO:	BTUH:	PLUMBING SERVICE:	NO:	SIZE:
Gas Line			Plumbing Fixtures		
Relocate Meter			Water Service		
Temporary Gas			Sanitary / Storm		
Appliances			C.C.C. Devices		

INSTALLATION COMMENTS: \_\_\_\_\_

**RESPONSIBILITY OF THE MECHANICAL CONTRACTOR** – Neither the granting of a permit, nor the approval of plans and specifications, nor inspections by a Safety Codes Officer shall in any way relieve the contractor from full responsibility for carrying out the work in strict accordance with the Safety Codes Act and the Alberta Building Code 2014.

<b>PERMITS MUST BE OBTAINED BEFORE COMMENCING WORK</b>	PERMIT FEE	\$	.	
	SAFETY CODE FEE	\$	.	
	TOTAL FEE	\$	.	

**Permits fees must be paid at the time of application.** We accept cash, debit, cheque or credit card. If applying by fax, email, or mail, a service representative will call you to advise you of your fees.

Office hours are Monday to Friday 8 a.m. to 4:30 p.m. The office is closed on statutory holidays.

Please note that the City of Edmonton, in accordance with the Payment Card Industry, has taken measures to protect your payment card information. We are required to delete applications submitted with credit card information by unsecured methods such as fax, email or mail.

Feb, 2017