Summer Village of Kapasiwin
PO Box 9
Kapasiwin, AB T0E 2Y0
Phone: 780 892 2684
www.kapasiwinalberta.com

PERMIT STICKER

The Inspections Group Inc.
12010 111 Avenue
Edmonton, AB T5G 0E6
Phone: 780 454 5048 Toll Free: 1 866 554 5048
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www.inspectiongroup.com

BUILDING PERMIT APPLICATION FORM

Application Date (Y/M/D): _____ **Estimated Completion Date (Y/M/D):** _____

Permit Applicant: ☐ **Owner** ☐ **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 & Regulations. Section 25(1) of the Permit Regulation AR 204/2007 of the Safety Codes Act RSA 2000, Chapter S-1 states: "A permit expires if the undertaking to which it applies: (a) Is not commenced within 90 days from the date of issue of the permit, (b) Is suspended or abandoned for a period of 120 days."

Owner Name: _____ 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 on the property. I am doing the work myself, and assume responsibility for compliance with the applicable Act and Regulations"

Contractor Name: _____ Address: _____

City: _____ Prov: _____ Postal Code: _____ Phone: _____

Fax: _____ Cell: _____ Email: _____

_____ _____
Contractor/Architect/Engineer Name Signature

Project Location in The Summer Village of Kapasiwin:

Street Address: _____

Legal Subdivision: Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____

Subdivision Name: _____ Lot: _____ Block: _____ Plan: _____

Directions: _____

Building Type:

- ☐ Single / Multi Family Dwelling
- ☐ Detached/Attached Garage
- ☐ Accessory Building
- ☐ Basement Development
- ☐ Deck
- ☐ Wood Burning Stove/Fireplace

Certification #_____

☐ Foundation Type

_____

☐ Other (specify)

_____

Type of Work:

- ☐ New Construction
- ☐ Relocation
- ☐ Addition
- ☐ Renovation
- ☐ Demolition
- ☐ Change of Occupancy
- ☐ Manufactured Home*
- ☐ Modular Home*

*CSA #_____

Development #_____

Building Use:

- ☐ Farm
- ☐ Single/Multi Residential
- ☐ Commercial
- ☐ Industrial
- ☐ Institutional
- ☐ Oil & Gas
- ☐ Other (specify)

_____

_____

_____

Building Area in Sq. Ft.:

Number of stories _____

Main area _____

2nd floor _____

Basement _____

Garage _____
(Attached / Detached)

Total Area _____

Basement developed at time of construction? ☐ Yes ☐ No

Description of Work: _____

*Manufactured Home – transportable in single or multiple sections; is ready for residential occupancy upon completion of setup.
*Modular Home – assembled at site in sections; sections have no chassis, running gear nor its own wheels.

Payment Type: ☐ Cash ☐ Cheque ☐ Credit Card Agreement ☐ On File

Credit Card #: _____ Expiry: _____

Permit Fee: $_____ + **SCC Levy***: $_____

Total Cost: $_____ Receipt #: _____

*$4.50 or 4% of the permit fee (whichever is greater) maximum $560.00

TIGI OFFICE USE ONLY

Issuing Officer's Name: _____

Issuing Officer's Signature: _____

Designation Number: _____

Permit Issue Date: _____

PLEASE CONTACT THE INSPECTIONS GROUP INC. FOR INSPECTIONS ALLOWING TWO WORKING DAYS NOTICE.

The personal information provided as part of this application is collected under Sec. 43 of the Safety Codes Act and Sections 303 and 295 of the Municipal Government Act and in accordance with Section 32.c of the Freedom of Information and Protection of Privacy Act.