



BUILDING PERMIT APPLICATION

Infrastructure & Planning, 1 Alexandra Park, Leduc, AB T9E 4C4
Telephone: 780-980-7124 | Fax: 780-980-7127 | Email: planning@leduc.ca

Project Municipal Address: _____

Project Legal Description: _____

Plan _____

Block _____

Lot _____

OFFICE USE ONLY

Application Received Date: _____

Application Number: _____

RESIDENTIAL

USE OF OCCUPANCY:

Single Detached Dwelling Duplex Dwelling Townhouse (3 to 6 Units) Other (Specify) _____

TYPE OF WORK:

New Home Construction / New Home Warranty Registration #: _____

New Construction Only - Area (m²)

1st Floor	2nd Storey	Attached Garage	Detached Garage	Basement Development

- Deck Shed Swimming Pool
- Covered Deck Detached Garage Addition
- Secondary Suite Alteration Basement Development
- Wood Stove / Fireplace Hot Tub Demolition
- Manufactured Home | Alberta Label # _____
- Other / Specify: _____

Total Area (m²): _____ Market Value of Project (\$): _____

Description of Work: _____

COMMERCIAL / INDUSTRIAL / MULTI-RESIDENTIAL

USE OF OCCUPANCY:

Commercial Industrial Institutional / Government Multi-Residential / No. of Residential Units: _____

TYPE OF WORK:

New Construction Foundation Demolition Addition Alteration

New Construction Only

No. of Floors	Area of Largest Floor (m ²)	Total Area (m ²)

Addition Only

Total Area (m ²)

Alteration Only

Total Area (m ²)

Market Value of Project (\$): _____

Description of Work: _____



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Property Owner's Name: _____
Address: _____ Postal Code: _____
Phone: _____ Mobile: _____ Fax: _____
Email: _____

APPLICANT

Applicant is Homeowner:

Fill out if different from Property Owner:

Name: _____
Address: _____ Postal Code: _____
Phone: _____ Mobile: _____ Fax: _____
Email: _____

Interest of Applicant: _____

I hereby accept responsibility to have the installation completed in accordance with the requirements of the *Safety Codes Act, Code, and Regulations*. I accept responsibility to ensure that the installation is inspected by a Safety Codes Officer prior to concealing any work, and upon completion of the installation. Neither the granting of a permit, nor inspections by a Safety Codes Officer shall in anyway relieve the Contractor from full responsibility for carrying out the work in accordance with the *Safety Codes Act, Codes, and Regulations* pursuant to the Act.

Signature: _____ Date: _____

Contractor's Company Name: _____
City of Leduc Business Licence #: _____
Address: _____
Postal Code: _____ Phone: _____ Fax: _____
Email: _____

WHEN APPLYING FOR A COMMERCIAL, INDUSTRIAL OR INSTITUTIONAL/GOVERNMENT USE, PLEASE COMPLETE FORM B "BUSINESS INFORMATION FORM" (attached)

FOIP Statement: The personal information requested on this form is being collected under the *Safety Codes Act* and the *Municipal Government Act* for issuing permits, safety codes compliance verification and monitoring, and property assessment purposes. The information is being collected in accordance with Section 33(c) of the *Freedom of Information and Protection of Privacy Act*. NOTE: The name of the permit holder and the nature of the permit is available to the public upon request. Questions regarding the collection of this personal information may be directed to the City Clerk at (780) 980-7177 at #1 Alexandra Park, Leduc, AB, T9E 4C4.