



ELECTRICAL 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: _____

USE OF OCCUPANCY:

Commercial Industrial Institutional / Government

Residential: Dwelling Apartment

TYPE OF WORK: New Addition Alteration

SERVICE CONNECTION NEEDED (yes/no)

Voltage _____ Amperes _____ Phase _____

New Residential _____ m2 Market Value of Electrical Installation (\$) _____

No. Apartment Suite / Unit _____

DESCRIPTION OF WORK:

New Home Wiring Basement Development Hot Tub Parking Pad Receptacle

Underground Service Detached Garage Air Conditioning Unit

Other / Specify: _____

Additional Information: _____

Property Owner's Name: _____

Address: _____ Postal Code: _____

Phone: _____ Mobile: _____ Fax: _____

Email: _____

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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. I am the certified master electrician who represents the Contractor.

Applicant/Master Electrician Name: _____

Address: _____ Postal Code: _____

Phone: _____ Mobile: _____ Fax: _____

Email: _____ (Approved Permit and Reports will be sent to this address)

Alberta Master Electrician # _____

Signature: _____ Date: _____

Contractor's Company Name: _____ City of Leduc Bus. Lic. # _____

Address: _____ Postal Code: _____

Phone: _____ Mobile: _____ Fax: _____

Email: _____ (Approved Permit and Reports will be sent to this address)

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.