

## HYDRONIC PERMIT APPLICATION CONTRACTOR

Street Address:  Project Legal Description:  Plan		Application Received Date:  Application Number:							
					Block		Master Project Number:		
					Lot		,		
PROPERTY OWNER NAME:		Address:	Pr	ostal Code:					
1	Phone:								
CONTRACTOR COM	PANY NAME:		City of Laduc Rue I	:o #					
Address: City:									
	•	(Approved Permit and Reports will be sent to this address)							
ourneyman Plumber #: _	Plumber Name:	Province:							
Signature:		Date:							
	Y: Commercial Industrial  New Addition Alterat	<del>_</del>	Residential: D	Owelling Apartment					
TYPE OF WORK: NC	OTE: Pipe Layout Plans required with	this permit application							
NO.	MAKE OF UNIT OR OTHER INSTALL	LATION	BTU						
				4					

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