

Gas Permit Application Form

Phone: (780) 968-8888
Fax: (780) 968-3225
Toll Free: 1-888-880-0858
Email: safetycodes@parklandcounty.com

Permit Type: Owner Contractor Estimated Project Completion Date: _____

Application Date (M/D/Y): _____ Building Permit Number: _____

Owner Information	
Owner Name: _____	Address: _____
Phone: _____	City: _____ Prov: _____ Postal Code: _____
Alt Phone: _____	Fax: _____ Email Address: _____

Contractor Information	
Contractor Name: _____	Address: _____
Phone: _____	City: _____ Prov: _____ Postal Code: _____
Alt Phone: _____	Fax: _____ Email Address: _____

Project Location: _____ PARKLAND COUNTY _____	Municipal Address: _____
Plan: _____	Block: _____ Lot: _____ Subdivision: _____
Legal Land Description: W of: _____ M Rg: _____ Twp: _____	1/4 Sect: _____ Part of: _____ Tax Roll: _____
Directions: _____	

Project Information	
<input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Multi-Family <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional	
Type of Work: <input type="checkbox"/> New <input type="checkbox"/> Renovations <input type="checkbox"/> Relocation <input type="checkbox"/> Addition <input type="checkbox"/> Connection <input type="checkbox"/> Basement Development <input type="checkbox"/> Other _____	
Description of Work: _____	

Gas Type: <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane	Gas Supplier Name: _____
# Furnaces: _____	# Water Heaters: _____ # Fireplaces: _____ # Dryers: _____ # Radiant Heaters: _____ # Other Outlets: _____
# BBQs: _____	# Secondary Risers: _____ # Boilers: _____ # Ranges: _____
Total # Outlets: _____	Total BTU's (Required for all installations): _____
Propane Tank Sets (not required for under 500 litre tanks): # Tank Set(s): _____ Tank Size: _____ # Vaporizer(s) _____	
Serial Number(s) _____	

Permit Applicant Declaration: The permit applicant certifies that this installation will be completed in accordance with the <i>Alberta Safety Codes Act and Regulations</i> . The permit applicant/owner acknowledges that as per Section 12(2) of the <i>Alberta Safety Codes Act</i> , Parkland County is not liable for any decision related to the system of inspections, examinations, evaluations and investigations including but not limited to a decision relating to their frequency and the manner in which they are carried out.		
Journeyman's Name (please print) _____	Journeyman's Signature _____	Homeowner's Signature (homeowner permits only) _____
Journeyman's Certification Number _____		

Permit Fee: \$ _____	*SCC Levy: \$ _____	*(4% of permit fee with a minimum of \$4.50)	TOTAL FEE: \$ _____
Payment Method: <input type="checkbox"/> Visa <input type="checkbox"/> M/C <input checked="" type="checkbox"/> Debit <input type="checkbox"/> Cheque <input type="checkbox"/> Cash		Receipt No.: _____	

FOR INSPECTIONS please contact PARKLAND COUNTY at: Ph. 780-968-8472; Fax 780-968--3225 or inspections@parklandcounty.com - Allow 48 hours notice for inspection

For Office Use Only – Credit Card Authorization

PAYMENT AMOUNT: _____

Card Holder: _____

Card #: _____

Expiry Date: _____ CSV # (3 digit # on back of credit card) _____

Signature: _____

Please note that permits will not be processed until payment is received.

The application can be dropped off at our office, emailed to safetycodes@parklandcounty.com, mailed/couriered or via faxed to 780-968-3225.