

Gas Permit Application



10001 - 84th Avenue, Clairmont, AB T8X 5B2

Phone: 780.513.3950 Fax: 780.539.7686

Email: plan@countygp.ab.ca

Permit Number: _____

Application Date: _____ Development Permit Number: _____

Permit Type: Owner Contractor Building Permit No.: _____

Other Permits/Applications Required: Development Building Electrical Plumbing PSDS

Landowner: _____

Mailing Address: _____

City: _____ Province: _____

Postal Code: _____ Phone: _____

Fax: _____ E-mail: _____

Applicant: _____

Mailing Address: _____

City: _____ Province: _____

Postal Code: _____ Phone: _____

Fax: _____ E-mail: _____

Contractor Name: _____

Mailing Address: _____

City: _____ Province: _____

Postal Code: _____ Phone: _____

Fax: _____ E-mail: _____

Journeyman's Name: _____

Journeyman Class and Number: _____

Legal: Lot: _____ Block: _____ Plan: _____

Part of: _____ 1/4 Sec: _____ Twp: _____ Rng: _____ W6M

Civic/Rural Address: _____

Subdivision Name: _____

Estimated Start Date: _____ Estimated Completion Date: _____

Type of Work: New Construction Basement Development Connection

Garage Accessory Building Renovation Alteration

**Please check all that apply* Addition Temporary Other

Intended Use: Agricultural Residential Commercial Industrial

Institutional Other

Resource Used: Natural Gas Other _____

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Permit Number: _____

Number of Outlets:

Furnaces:		Barbeques:	
Water Heaters:		Space Heaters:	
Fireplaces:		Roof Top Units:	
Unit Heaters:		Ranges:	
Boilers:		Secondary Risers:	
Automatic Dryers:		Other Outlets:	
		Total Number of Outlets:	

Total BTU's: _____

Propane:

Number of Tanks: _____

Tank Size: _____

Vaporizer Refill Centre Temporary Heat

***Please check all that apply** Service Line from Tank to Building

Description of Work:

Permit Applicant Declaration: The permit applicant hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations, all applicable Codes, and Municipal Bylaws. Work shall commence within 90 days from the date of the issuance of the permit and expires in accordance with the County of Grande Prairie No.1's Uniform Quality Management Plan (QMP) without extension request. If the work authorized by the permit is suspended or abandoned for a period of 120 days at any time after the work has commenced, the permit will expire.

The personal information on this form is collected under the authority of Section 33(c) of the Freedom of Information and Protection of Privacy Act, Section 642 of the Municipal Government Act and /or the Safety Codes Act. The information will be used to process the application(s) and the names &/or address of where the development /use is being proposed may be made available to the public upon request or at a Public Council Meeting. If you have any questions on the collection and use of the information; please contact the FOIP Representative at 780-532-9722.

In the event that this permit is taken out to complete works started under a cancelled permit for the specific project, the applicant assumes responsibility that any previous work started for the project is completed in accordance with Safety Codes Standards by time of project completion.

I hereby certify that I am the owner or owner's agent of the property for this application. I have read and understood the statements printed on this form. I agree to all applicable laws in this jurisdiction.

Applicant Name (Please Print)

Applicant Signature

Application Fee:	WEMBLEY Portion of Permit Fee:	WMLB
	COUNTY Portion of Permit Fee:	WMRV
	Penalty:	CR42
	Permit Fee Subtotal:	
	Safety Codes Council Levy:	CR95
	Other Fee:	
	Total Fee:	
Payment Method: <input type="checkbox"/> Cash <input type="checkbox"/> Debit <input type="checkbox"/> Cheque <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Money Order <input type="checkbox"/> Invoice		