



Lac La Biche County
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GAS PERMIT APPLICATION FORM

Permit Number: _____ File Number: _____ Roll Number: _____

e-SITE #: _____ Application Date: DD / MMM / YYYY Estimated Completion Date: DD / MMM / YYYY

Applicant Type: Owner Contractor **Cost of Installation (Labour & Material) \$** _____

The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act & Regulations and shall commence within 90 days. This permit expires after 90 days without an extension request.

Owner Name: _____ **Mailing Address:** _____
 City: _____ Prov: _____ Postal Code: _____ Phone: _____ Fax: _____
 Cell: _____ Email: _____

Owner's Signature / Declaration (Single Family Residential Only)

"I hereby declare I am the owner of the premises in which the work will be conducted, and reside or will reside on the property. I am doing the work myself, and assume responsibility for compliance with the applicable Act and Regulations"

Contractor Name: _____ **Mailing Address:** _____
 City: _____ Prov: _____ Postal Code: _____ Phone: _____ Fax: _____
 Cell: _____ Email: _____

Installer's Number _____ Print Installer's Name _____ Installer's Signature _____

Project Location in Lac La Biche County:

Street Address: _____
 Legal Subdivision: Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____
 Subdivision Name: _____ Lot: _____ Block: _____ Plan: _____
 Directions: _____

TYPE OF OCCUPANCY:	SINGLE FAMILY APPLICATION ONLY: (Number of Outlets)	COMMERCIAL/INDUSTRIAL APPLICATION ONLY:	PROPANE INSTALLATION:
<input type="checkbox"/> Residential	Furnace _____	Total BTU _____	No. of Tanks _____
<input type="checkbox"/> Farm/Ranch	Water Heater _____	Name of Gas Supplier _____	Tank Size _____
<input type="checkbox"/> Commercial	Fireplace _____	DESCRIPTION OF WORK FOR ALL GAS PERMITS: _____ _____ _____ _____	Serial # _____
<input type="checkbox"/> Industrial	Dryer _____		<input type="checkbox"/> Vaporizer
<input type="checkbox"/> Oilfield/Gas	Unit Heater _____		<input type="checkbox"/> Refill Centre
<input type="checkbox"/> Institutional	Range _____		<input type="checkbox"/> Service Line from Tank to Building
<input type="checkbox"/> Mobile	Room Heater _____		<input type="checkbox"/> Temporary Heat
<input type="checkbox"/> Manufactured	Boilers _____		
	Conversion _____		
	Replacement Appliance _____		
	Secondary Risers _____		
	Barbeque _____		
	Other _____		

Payment Type: Cash Cheque MC VISA Interac
 Credit Card Number: _____ Exp: _____
 Cardholder Name / Signature: _____
Permit Fee: \$ _____ **+ SCC Levy: \$** _____
 *\$4.50 or 4% of the permit fee maximum \$560.00
Total Cost: \$ _____ Receipt #: _____

TIGI OFFICE USE ONLY
 Issuing Officer's Name: _____
 Designation Number: _____
 Issuing Officer's Signature: _____
 Permit Issue Date: DD / MMM / YYYY