



Town of Westlock
 10003 106 Street
 Westlock, AB T7P 2K3
 Phone: 780-349-4444
 Fax: 780-349-4436
 planning@westlock.ca



Inspection Requests:
Superior Safety Codes Inc.
 14613-134 Avenue
 Edmonton, AB T5L 4S9
 Phone: 780-489-4777
 Fax: 780-489-4711

GAS PERMIT APPLICATION FORM

Applicant: Owner Contractor

Permit Number: 345345-____-G_____

Application Date: _____

Building Permit: _____
 Development Permit: _____

Project Value (Labor + Materials): \$ _____ Estimated Start Date: _____ Estimated Completion Date: _____

Owner: _____ Mailing Address: _____
 City: _____ Prov.: _____ Postal Code: _____ Phone: _____
 Email Address: _____

Owners Signature (Single Family Residential Only): _____

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

Contractor: _____ Mailing Address: _____
 City: _____ Prov.: _____ Postal Code: _____ Phone: _____
 Cell Number: _____ Fax: _____ Email Address: _____

Journeyman Gasfitter's Name	Journeyman's Number	Journeyman's Signature	Business License No.

Project Location:
 Street Address: _____ Roll Number: _____
 Lot(s): _____ Block: _____ Plan: _____
 Legal Subdivision: Part of: _____ Section : _____ Township: _____ Range: _____ W of 4

Permit Applicant Declaration: The permit applicant certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations and work will commence within 90 days. The permit applicant/owner acknowledges that as per Section 12(2) of the Alberta Safety Codes Act; Superior Safety Codes Inc. 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. The personal information provided on this form is protected by the Freedom of Information of Privacy Act.

Propane Tank Sets: New Existing #Tank Sets: _____ Tank Size: _____
 Serial Number(s): _____

Type of Building: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Multi-Family <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Oil & Gas	Type of Work: <input type="checkbox"/> New <input type="checkbox"/> Renovation <input type="checkbox"/> Addition <input type="checkbox"/> Accessory Building <input type="checkbox"/> Temp Heat <input type="checkbox"/> Replacement <input type="checkbox"/> Manufactured / Mobile Home <input type="checkbox"/> Other _____ Type of Gas: <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane	Project Information: _____ Furnaces; _____ Water Heaters _____ Fireplaces; _____ Dryers _____ Boilers; _____ Unit Heater _____ BBQ's; _____ Ranges _____ Other Outlets _____ Secondary Gas Lines _____ Total # of Outlets BTU Input _____ (Non-residential):	Detailed Description of Work: _____ _____ _____ _____ Name of Gas Supplier: _____
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Permit Fee: \$ _____ ***SCC Levy:** \$ _____ **TOTAL FEE:** \$ _____ *SCC Levy is 4% of the permit fee with a minimum of \$4.50 and a maximum of \$560

Payment Method: Visa M/C Visa Debit Cheque Cash

Receipt #: _____

Permit Validation Section to be completed by the Permit Issuer:

Special Conditions: _____

Permit Issuer's Name (print or type) _____	Permit Issuer's Signature _____
Designation Number _____	Date of Issue (M/D/Y): _____

INSPECTION REQUESTS please contact Superior Safety Codes at:
 Ph. 780.489.4777 or 1.866.999.4777
 Allow 48 hours notice for inspection