



Davis Inspection Services Ltd

#204C, 4712 - 13th St NE, Calgary, T2E 6P1

info@davisinspections.ca

Office: (403) 275-3338 Fax: (403) 275-9790

Tel/Fax 1(800) 639-0912 www.davisinspections.ca

Electrical Permit Application

Permit Applicant: Owner Contractor

Application Date (mm/dd/yyyy):

Estimated Start Date (mm/dd/yyyy):

Development Permit No. (if applicable):

Estimated Completion Date (mm/dd/yyyy):

Building Permit No. (if applicable):

Value of Work (labour & materials):

Owner Name (printed):

Mailing Address: City/Town/Village: Province: Postal Code:

*Email: Owners Phone #: Fax #:

Contracting Company Name (printed): Contact Name (printed):

Mailing Address: City/Town/Village: Province: Postal Code:

*Email: Owners Phone #: Fax #:

Project Location

Municipality: Subdivision/ Hamlet Name: Tax Roll No.:

Street/ Rural Address: Unit:

* Legal land description is required

Lot: Block: Plan: LSD: Quarter: Section: Township: Range: West of:

Directions:

Description of Work (please provide a complete and detailed description of the work to be completed including all applicable drawings/ documents):

Work has not started Work is in progress Work is complete

WORK SHOULD NOT COMMANCE BEFORE PERMIT IS ISSUED / WORK MUST BE INSPECTED BEFORE COVERING

Table with 3 columns: TYPE OF OCCUPANCY, TYPE OF WORK, SERVICE AND INSTALLATION AREA. Includes checkboxes for residential, commercial, industrial, etc., and options for new, addition, renovation, etc.

FOIP Notification: Personal information collected on this form is collected under the authority of section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act.

Master Electrician Name (please print) Certification No. Master Electrician Signature

Homeowner's Signature (homeowner permit only) Homeowner Declaration: 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.

OFFICE USE ONLY

Other Permits Required Building Plumbing Gas Private Sewage Not Applicable

Permit Fee: \$

GST: \$

Travel Fee: \$

Total Cost: \$

Receipt No.:

Invoiced Cash Cheque Debit

Credit Card Visa MC (attach signed credit card authorization form)

SCO/Permit Issuers Name:

SCO/Permit Issuers Signature:

Designation No.:

Permit Issue Date:

(mmm/dd/yyyy)