



FOR OFFICE USE ONLY
PERMIT NUMBER

HOMEOWNER'S GAS FIREPLACE INSTALLATION PERMIT APPLICATION

PL1218 (R2016-01)

JOB ADDRESS <i>(Suite, House No., Street, Quadrant)</i>						
CATEGORY OF WORK			TYPE OF WORK			
<input type="checkbox"/> Commercial	<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Residential	<input type="checkbox"/> New	<input type="checkbox"/> Improvement		
DETAILED DESCRIPTION OF WORK						
SPECIFIC LOCATION / ADDITIONAL INFORMATION						
TOTAL JOB COST		<input type="checkbox"/> Charge working without a permit fee	Percent of work done without a permit	PERMIT FEES	SCC SURCHARGE	TOTAL PERMIT FEE
\$			%	\$	\$	\$
HOMEOWNER NAME		TELEPHONE NUMBER	E-MAIL ADDRESS		<input type="checkbox"/> No e-mail address	
		()				
HOMEOWNER IS A JOURNEYMAN GASFITTER			JOURNEYMAN NUMBER	RELATED BUILDING PERMIT NUMBER		
<input type="checkbox"/> No <input type="checkbox"/> Yes						

DECLARATION:

I declare that I am the legal landowner of the property stipulated on this application, that this is my primary place of residence, and I will be performing the work. As the property owner, I have verified that the information contained within this document and all associated documents is correct and complete. I also declare that at the appropriate stages of construction that 3-1-1 shall be contacted to arrange for the inspection(s). I acknowledge that neither the granting of a permit, nor the approval of plans and specifications, nor inspections by a Safety Codes Officer shall in anyway relieve me (the owner) from full responsibility for carrying out the work in strict accordance with the Safety Codes Act, and Alberta Building Code and all relevant City Bylaws, Provincial or Federal Statutes or Regulation in force.

I am aware that this permit may expire after 180 calendar days. Please refer to permit expiry conditions for further information.

I declare that I have read and agree to abide by the conditions above.

HOMEOWNER NAME (PLEASE PRINT)	HOMEOWNER SIGNATURE	DATE YYYY MM DD

The personal information on this form is being collected under the authority of The Calgary Building Permit Bylaw 64M94 (Section 5) and amendments thereto. It will be used for the permit review and inspection processes and may be communicated to relevant City Business Units, utility providers, and Alberta Health Services. It may also be used to conduct ongoing evaluations of services received from Planning, Development & Assessment. The name of the applicant and the nature of the permit will be available to the public. Please send inquiries by mail to the FOIP Program Administrator, Planning, Development & Assessment, PO Box 2100, Station M, Calgary, AB T2P 2M5 or contact us by phone at 311.