|   | PO Box 369<br>Viking, AB T0B 4N0<br>Phone: (780) 336-3466<br>Fax: (780) 336-2660<br>www.viking.ca |                 | 12010 – 111 Avenue<br>Edmonton, AB T5G 0E6<br>Phone: (780) 454-5048 Toll Free: (866) 554-5048<br>Fax: (780) 454-5222 Toll Free: (866) 454-5222<br>www.inspectionsgroup.com |                         |
|---|---|-----------------|--|-------------------------|
| PLUMBING PERMIT APPLICATION FORM      Application Date:DD / MMM / YYYY    Estimated Project Completion Date:DD / MMM / YYYY   |   |                 |  |                         |
| Applicant Type: Homeowner Contractor Cost of Installation (Labor & Mater<br>The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act. A permit may expire if the undertaking<br>days of issue of the permit, (b) is suspended or abandoned for a period of 120 days. An extension can be considered when applied for in writing prior to permit e                        |   |                 |  | rial):                  |
| Owner Name:   |   | Maili           | ng Address:  |                         |
|   | Prov: Postal Code   |                 |  |                         |
| Cell: Email:  |   |                 |  |                         |
| Company Name:   |   | Maili           | ng Address:  |                         |
| City:   | Prov: Postal Code   | ə:              | Phone:   | Fax:                    |
| Cell:   | Email:  |                 |  |                         |
| Installer's Number Print Installer's Name Installer's Signature   |   |                 |  |                         |
| Project Location in the   | ne Town of Viking:  |                 |  |                         |
| Street Address:   |   |                 | Tax Roll #:  |                         |
| Legal Subdivision:  Part of:   West of:   |   |                 |  |                         |
| Subdivision Name:    Lot:    Block:    Plan:  |   |                 |  |                         |
| Directions:   |   |                 |  |                         |
| TYPE OF   | NUMBER OF FIXTURES:   | WATER           | AND OR SEWER SERVICE:  | PLUMBING DESCRIPTION OF |
| OCCUPANCY:  | Kitchen Sinks   |                 | onnect from Septic Connect to  | WORK:                   |
| Farm/Ranch  | Basins<br>Showers   | Municipal Sewer |  |                         |
|   | Laundry   | wuni            | cipal Sewer  |                         |
| Commercial  | Toilets   |                 |  |                         |
| Industrial  | Washers   | U Wate          | Water and/or Sewer Services  |                         |
| Oilfield/Gas  | Bathtubs<br>Floor Drains  |                 |  |                         |
| Institutional   | Grease Traps  | 🗌 Mobi          | le Home/Factory Assembled  |                         |
| Mobile  | Bidets/Water Fountains  | Build           | Building Connection  |                         |
| Manufactured  | Urinals<br>Other  | Duild           |  |                         |
| I the permit applicant understand and acknowledge the selected inspection stages will take place at my request. Any additional inspections requested may be charged at a rate of \$110 per inspection (plus Levy).  or  FINAL    Decline  Decline    *Homeowner applicants must select 2 stages of inspection / Contractors may select only 1 inspection, additional selected inspections will be charged at \$110 / Inspection (plus Levy) |   |                 |  |                         |
| Payment Type: Cash Cheque C/C Agreement Interac TIGI OFFICE USE ONLY  |   |                 |  |                         |
|   |   |                 | Issuing Officer's Name:  |                         |
|   |   |                 |  |                         |
| Total Cost: \$  |   |                 | Designation Number:  |                         |
| Total Cost: \$  Receipt #:  Permit Issue Date:  DD / MMM / YYYY    *\$4.50 or 4% of the permit fee maximum \$560.00  Permit Issue Date:  DD / MMM / YYYY  |   |                 |  |                         |
|   |   |                 |  |                         |

The Inspections Group Inc.

Town of Viking

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PLEASE CONTACT THE INSPECTIONS GROUP INC. PRIOR TO COVER OR CONCEALMENT FOR INSPECTIONS ALLOWING 2 - 5 WORKING DAYS NOTICE AND PROVIDE SAFE ACCESS. The personal information provided as part of this application is collected under the Safety Codes Act and the Municipal Government Act and in accordance with the Freedom of Information and Protection of Privacy Act. The information is required and will be used for issuing permits, safety codes compliance verification and monitoring, and property assessment purposes. The name of the permit holder and the nature of the permit is available to the public upon request. If you have any questions about the collection or use of the personal information provided, please contact the Municipality.