Summer Village of South View PO Box 8

R VILL

Alberta Beach AB T0A 0A0 Phone: (587) 873 5765 Fax: (780) 967 0431 www.summervillageofsouthview.com

The Inspections Group Inc.

12010 – 111 Avenue NW Edmonton AB T5G 0E6 Phone: (780) 454 5048 Toll Free: (866) 554 5048 Fax: (780) 454 5222 Toll Free: (866) 454 5222 www.inspectionsgroup.com

		IIT APPLICATION FORM		
Application Date: DD / MMM	/ ҮҮҮҮ	Estimated Project Co	mpletion Date: DD / MMM / YYYY	
Applicant Type: 🗌 Homeowner 🛛 🛛			ur & Material) \$	
lays of issue of the permit, (b) is suspended or aba	andoned for a period of 120 days. An extension can	be considered when applied for in writing prior to		
	of plans / specifications & payment must accom			
Owner Name:		Mailing Address:		
City:	Prov: Postal Code:	Phone:	Fax:	
Owner's Signature / Declaration (Single		Cell: I	Email:	
	remises in which the work will be conducted,	, and reside or will reside on the property.	I am doing the work myself, and assume responsibility	
Company Name:		Mailing Address:		
City:	Prov: Postal Code:	Phone:	Fax:	
Cell:	Email:			
Contractor/Architect/En	ngineer Name		Signature	
Project Location in the Summer Village	°		Work: I not started I in progress I complete	
Street Address:		Tax Ro	bll #:	
Legal Subdivision: Part of:	Section: To	ownship: Range:	West of:	
Subdivision Name:	Lo	ot: Block:	Plan:	
Directions:				
BUILDING TYPE:	TYPE OF WORK:	BUILDING USE:	BUILDING AREA IN SQ. FT.:	
Single Family Dwelling	New Construction	☐ Farm	Number of stories	
Detached/Attached Garage	Relocation	Single/Multi Residential	Main area	
Accessory Building	Addition		2 nd floor	
Basement Development	Renovation / Repair		Basement	
			Garage	
Solid fuel burning appliance	Change of Occupancy		Total Area	
0	Manufactured Home*	_		
Certification #	 ☐ Modular Home*	Other (specify)	Deck	
Foundation Type	☐ Foundation			
	 CSA #		Basement developed at time of construction?	
Other (specify)	Development #	Seasonal Property? 🗌 Yes 🔲 No	Yes No	
		-		
Description of Work: Energy Compliance Method: Perform				
*Manufactured Home - transportable in si	ingle or multiple sections; is ready for resider ctions; sections have no chassis, running ge			
I the permit applicant understand and ack		DATION FRAMING INSULATION	HVAC 🛛 FINAL* 🗌 Other:	
stages will take place at my request. S	ingle family dwellings include 🛛 Acc	cept Accept Accept	Accept (*Required)	
one additional inspection stage with pe	Colored Colored		Decline ay be selected at \$150/Inspection (plus Levy)	
		·		
Payment Type: Cash Che	eque 🛛 C/C Agreement 🗋 Interac		TIGI OFFICE USE ONLY	
Permit Fee: \$			Issuing Officer's Name:	
			Issuing Officer's Signature:	
Total Cost: \$ Receipt #:			Designation Number:	
*\$4.50 or 4% of the permit fee maximum \$	\$560.00	Permit issue Date:	ן עט / אואואו / איז / עט / אואואו	
	5 7	PLICATION TO THE INSPECTIONS GRO	OUP INC.	

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.