



IJD Inspections Ltd.
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 www.ijd.ca

PERMIT # _____
 Office Use

PLUMBING PERMIT APPLICATION FORM

Permit Applicant: Owner Contractor Application Date (mm/dd/yyyy): _____
 Development Permit No.(if applicable): _____ Estimated Project Completion Date (mm/dd/yyyy): _____

Owner Name: _____ Mailing Address: _____
 City: _____ Province: _____ Postal Code: _____ Phone: _____
 Cell: _____ Email: _____ Fax: _____

Contractor Name: _____ Mailing Address: _____
 City: _____ Province: _____ Postal Code: _____ Phone: _____
 Cell: _____ Email: _____ Fax: _____

Municipality of Project: Town of Crossfield Subdivision/Hamlet: _____
 Street/Rural Address: _____ Apt/Unit: _____ Lot: _____ Block: _____ Plan: _____
 Legal Subdivision: Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____ M

Description of Work:

Work has not started Work is in progress Work is completed Unknown when work was completed (permit needed for home sale)

TYPE OF OCCUPANCY	TYPE OF WORK	NUMBER OF FIXTURES	
<input type="checkbox"/> Single Family <input type="checkbox"/> Multi-family <input type="checkbox"/> Farm/Ranch <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Relocatable Industrial # of drops _____ <input type="checkbox"/> Other _____	<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Renovation (Interior) <input type="checkbox"/> Accessory Building <input type="checkbox"/> Basement Development <input type="checkbox"/> Service Connection <input type="checkbox"/> Annual Permit <input type="checkbox"/> Manufactured Homes/RTM # of drops _____ Foundation Type _____ <input type="checkbox"/> Other _____	Kitchen Sinks: _____ Lavatory Sinks: _____ Showers: _____ Bathtubs: _____ Toilets/Bidets: _____ Urinals: _____ Janitor Sink: _____	Laundry Tubs: _____ Clothes Washer: _____ Roof Drains: _____ Floor Drains: _____ Grease Traps: _____ Water Fountains: _____ Other Fixtures: _____
		Total # of Fixtures _____	

Permit Applicant Declaration: The permit applicant/owner acknowledges that as per Section 12(2) of the Alberta Safety Codes Act, IJD Inspections Ltd. 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. **F.O.I.P. Notification:** Personal information is collected under the authority of Section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act and section 63 of the Safety Codes Act. It will be used for processing permit applications, issuing permits, safety codes compliance monitoring and verification.

Journeyman's Name (please print) _____ **X** Journeyman's Signature _____ **OR X** Homeowner's Signature (homeowner permit only) Homeowner Declaration:
 Journeyman's Certification No.: _____ By signing this I hereby certify that I own/will own and occupy this dwelling.

PERMIT FEE SUMMARY			
Permit Fee:	\$ _____	New Adjusted Fee	\$ _____
Travel Fee:	\$ _____	Adjusted SCC Levy	\$ _____
SCC Levy:	\$ _____	Subtotal	\$ _____
Total Permit Cost	\$ _____	Total Credit/Refund	\$ _____
Receipt#	_____	Receipt #	_____
<input type="checkbox"/> Cash <input type="checkbox"/> E-Transfer (to: permits@ijd.ca) <input type="checkbox"/> Cheque <input type="checkbox"/> Debit <input type="checkbox"/> Credit Card			

Homeowner (homeowner permits) or the Journeyman (contractor permits).
 Contractors are required to obtain a **Business License** through the Town of Crossfield

Email completed application form to: permits@ijd.ca