



Mountain View
C O U N T Y

GAS PERMIT APPLICATION

Permit Number _____

1408 Twp. Rd. 320 / Postal Bag 100, Didsbury, AB Canada TOM OWO
T 403.335.3311 F 403.335.9207 Toll Free 1.877.264.9754
www.mountainviewcounty.com

Permit Type: Owner Contractor DP # _____ BP # _____
Application Date (M/D/Y): _____ Other Permits/Applications: Building Electrical Plumbing PSDS

Landowner: _____
Mailing Address: _____ City: _____ Prov: _____ Postal Code: _____
Phone: _____ Fax: _____ Alternate Phone: _____
Email Address: _____

Applicant: _____
Mailing Address: _____ City: _____ Prov: _____ Postal Code: _____
Phone: _____ Fax: _____ Alternate Phone: _____
Email Address: _____

Contractor: _____
Mailing Address: _____ City: _____ Prov: _____ Postal Code: _____
Phone: _____ Fax: _____ Alternate Phone: _____
Email Address: _____

Legal: Part of: _____ ¼ Sect: _____ Twp: _____ Rg: _____ W of: _____ Roll Number (Office Use): _____
Plan: _____ Block: _____ Lot: _____ Rural Address: _____
Directions: _____

Estimated Completion Date: _____ **Estimated Project Value:** \$ _____

| | | |
|--|--|--|
| Type of Work: <input type="checkbox"/> New Construction <input type="checkbox"/> Manufactured Home (connection only) <input type="checkbox"/> Modular Home <input type="checkbox"/> Relocation <input type="checkbox"/> Addition <input type="checkbox"/> Renovation <input type="checkbox"/> Accessory Building <input type="checkbox"/> Temporary Service | Building Use: <input type="checkbox"/> Agricultural <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Oil & Gas <input type="checkbox"/> Other (please specify) _____ | Gas Outlets (Insert number of each item): <input type="checkbox"/> Natural Gas or <input type="checkbox"/> Propane # Furnaces _____ # BBQ's _____ # Water Heaters _____ # Secondary Risers _____ # Fireplaces _____ # Boilers _____ # Automatic Dryers _____ # Ranges _____ # Radiant Heaters _____ # Other Outlets _____ Total # Outlets _____ |
|--|--|--|

Propane Tank Set: # Tank Set: _____ Tank Size: _____ Serial #(s): _____
Total BTU's (Non-Residential): _____ **Total Developed Area** _____ sq ft

Description of Work

INSPECTION REQUESTS please contact Superior Safety Codes at:
Ph. 403-717-2344 or 1-888-717-2344 Fax 403-717-2340 or 1-888-717-2340
Allow 48 hours notice for inspection

Permit Applicant Declaration: The permit applicant certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations and work will commence within 90 days and generally expires after one year without an extension request. The permit applicant/owner acknowledges that as per Section 12(2) of the Alberta Safety Codes Act; Mountain View County and its accredited agency are 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. The personal information provided on this form is protected by the Freedom of Information of Privacy Act.

I (am/represent)* the owner of the land and (will be/represent)* the owner of the building for which I am submitting this permit application. I have read and understood the statements printed on this form. I agree to all applicable laws in this jurisdiction.

*Strike out non-applicable word

Name (Please print) Signature

Journeyman's Certification Number

Payment Method: Visa M/C Debit Cheque Cash Auth / Chq. Number _____

Name of Cardholder: _____ Signature of Cardholder: _____

Credit Card #: _____ Expiry Date: _____ Date of Auth: _____

Permit Fee: \$ _____ *SCC Levy: \$ _____ (*4% of permit fee with a minimum of \$4.50)

TOTAL FEE: \$ _____

Office Use Only

Permit Validation Section to be completed by Permit Issuer:

Special Conditions: _____

Permit Issuer's Name (print or type) Permit Issuer's Signature

Permit Issuer's Designation Number: _____ Date of Issue (M/D/Y): _____

Bylaw No. 17/06
Schedule E - Excerpt
 Planning and Development Services

| RESIDENTIAL GAS PERMIT FEES | |
|------------------------------------|-------------------|
| Number of Outlets | Permit Fee |
| 1 | \$85.00 |
| 2 | \$100.00 |
| 3 | \$120.00 |
| 4 | \$150.00 |
| 5 | \$170.00 |
| Add \$15.00 per outlet over 5 | |

| Description | Permit Fee |
|---------------------------------------|-------------------|
| Secondary Gas Line | \$70.00 |
| Manufactured / Mobile Home Connection | \$70.00 |
| Propane Tank Set | \$100.00 |

| NON-RESIDENTIAL GAS PERMIT FEES | |
|--|---|
| BTU Input | Fee |
| 0 - 150,000 BTU input | \$75.00 |
| 150,001 - 250,000 BTU input | \$100.00 |
| 250,001 - 350,000 BTU input | \$125.00 |
| 350,001 - 500,000 BTU input | \$150.00 |
| 500,001 - 750,000 BTU input | \$175.00 |
| 750,001 - 1,000,000 BTU input | \$200.00 |
| Over 1,000,000 BTU input | \$50.00 / 1,000,000 BTU (or portion of) |

| Temporary Heat | |
|--------------------------------|------------|
| BTU Input | Fee |
| 0 - 250,000 BTU input | \$75.00 |
| greater than 250,000 BTU input | \$100.00 |

Add 4% Safety Codes Council Fee for each permit issued with a minimum of \$4.50 and a maximum of \$560.00