



Lac La Biche County
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WOOD STOVE BUILDING PERMIT APPLICATION FORM

File Number: _____ Permit Number: _____

Application Date: DD / MMM / YYYY e-SITE Number: _____

Applicant Type: Homeowner Contractor Cost of Installation (Labour & Material)\$ _____

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 to which it applies: (a) is not commenced within 90 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 expiry date.

****2 Sets of plans / specifications & payment must accompany this application** Additional inspections are available for an additional fee**

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

Owner's Signature / Declaration (Single Family Residential Only)

"I hereby declare I am the owner of the premises in which the work will be conducted, and reside or will reside on the property. I am doing the work myself, and assume responsibility for compliance with the applicable Act and Regulations"

Company Name: _____ Mailing Address: _____
 City: _____ Prov: _____ Postal Code: _____ Phone: _____ Fax: _____
 Cell: _____ Email: _____

 Contractor Signature Builder License Number

Project Location in Lac La Biche County:

Work: not started in progress complete

Street Address: _____ Tax Roll #: _____
 Legal Subdivision: Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____
 Subdivision Name: _____ Lot: _____ Block: _____ Plan: _____

BUILDING TYPE: <input type="checkbox"/> Dwelling Unit <input type="checkbox"/> Detached/Attached Garage <input type="checkbox"/> Accessory Building <input type="checkbox"/> Basement Development <input type="checkbox"/> Wood Burning Stove/Fireplace Certification # _____ <input type="checkbox"/> Manufactured Home* <input type="checkbox"/> Modular Home*	TYPE OF WORK: <input type="checkbox"/> New Construction <input type="checkbox"/> Relocation <input type="checkbox"/> Addition <input type="checkbox"/> Renovation	BUILDING USE: <input type="checkbox"/> Farm <input type="checkbox"/> Single/Multi Residential <input type="checkbox"/> Commercial	FLOOR PLAN (show installation location below):
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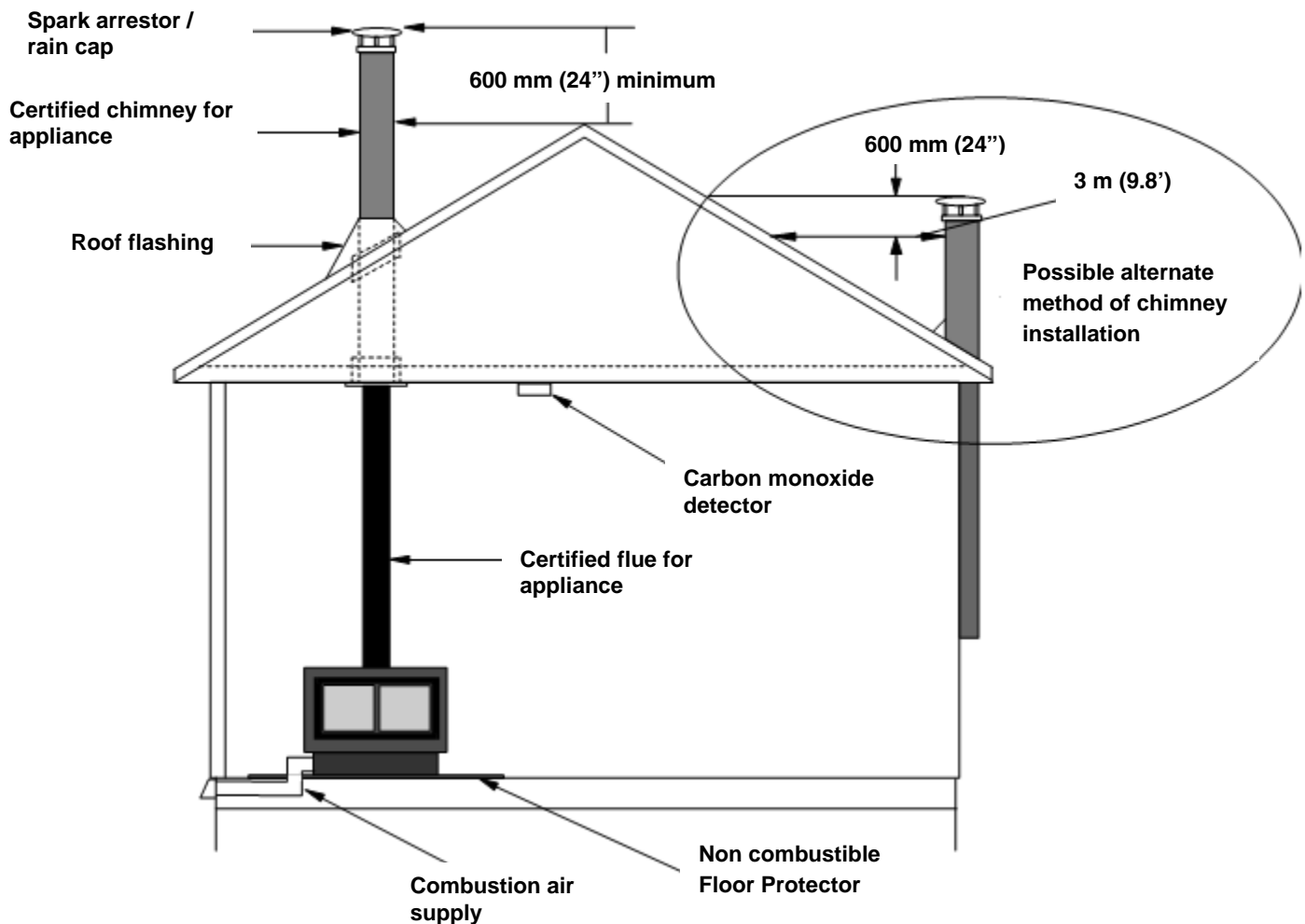
Description of Work: _____

Payment Type: <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> MC <input type="checkbox"/> VISA <input type="checkbox"/> Interac Credit Card Number: _____ Exp: _____ Cardholder Name / Signature: _____ Permit Fee: \$ _____ + SCC Levy: \$ _____ *\$4.50 or 4% of the permit fee maximum \$560.00 Total Cost: \$ _____ Receipt #: _____	OFFICE USE ONLY Issuing Officer's Name: _____ Designation Number: _____ Issuing Officer's Signature: _____ Permit Issue Date: <u>DD / MMM / YYYY</u>
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PLEASE CONTACT THE INSPECTIONS GROUP INC. FOR INSPECTIONS ALLOWING 2 – 5 WORKING DAYS NOTICE & 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.

TYPICAL ARRANGEMENT FOR A WOODSTOVE INSTALLATION



Submission requirements for this permit application;

1. Proof that the wood, (or other solid fuel), stove has been designed and constructed in conformance with CAN/CSA-B365, "Installation Code for Solid Fuel Burning Appliances and Equipment".
2. A copy of the manufacturer's installation instructions.
3. A floor plan indicating room dimensions location and clearances of the wood stove.