



COUNTY OF  
**NEWELL**



**PARK ENTERPRISES LTD.**  
"Inspections by People Who Care!"

File  
Number: \_\_\_\_\_

Date  
Received: \_\_\_\_\_

Tax Roll No.: \_\_\_\_\_

183037 Range Road 145 P.O. Box 130 Brooks, AB T1R 1B2  
Phone: 403-362-3266 | Fax: 888-361-7921 | www.countyofnewell.ab.ca

**PLUMBING PERMIT APPLICATION FORM**

Development Permit No.: \_\_\_\_\_ Estimated Project Completion Date (mmm/dd/yyyy): \_\_\_\_\_

Permit Applicant:  Owner  Contractor  Work has not started  Work is in progress  Work is complete

**Owner / Applicant:** \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

**Contractor:** \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

**Project Location:** Municipality: County of Newell Subdivision Name: \_\_\_\_\_

Street/Rural Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_ Legal Subdivision: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ West of: \_\_\_\_\_

Directions: \_\_\_\_\_

**Please Provide a Detailed Description of Work:**

TYPE OF OCCUPANCY	TYPE OF WORK	NUMBER OF FIXTURES
<input type="checkbox"/> Single Residential <input type="checkbox"/> Multi-family <input type="checkbox"/> Farm/Ranch <input type="checkbox"/> Manufactured/Mobile Home <input type="checkbox"/> Oil and Gas <input type="checkbox"/> Skid Units <input type="checkbox"/> Other: _____	<input type="checkbox"/> New <input type="checkbox"/> Accessory Building <input type="checkbox"/> Ready to Move <input type="checkbox"/> Service Connection <input type="checkbox"/> Other: _____	Kitchen Sinks: _____ Bathtubs: _____ Basins: _____ Floor Drains: _____ Showers: _____ Grease Traps: _____ Laundry Tubs: _____ Bidets/Water Fountains: _____ Toilets: _____ Urinals: _____ Washing Machine: _____ Other Fixtures: _____ <b>Total:</b> _____

**FOIPP Notification:** The personal information required by the County of Newell application forms 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. The name of the permit holder and nature of the permit may be included on reports provided to the municipality or made available to the public as required or allowed by legislation. Please direct any questions about this collection to the County of Newell at 403-362-3266 or 183037 Range Road 145, PO Box 130, Brooks, AB T1R 1B2.

\_\_\_\_\_  
Journeyman's Name (print)

\_\_\_\_\_  
Journeyman's Signature

\_\_\_\_\_  
Homeowner's Signature (homeowner permit only)

\_\_\_\_\_  
Journeyman's Certification No.:

**Homeowner Declaration: By signing this application I hereby certify that I own/will own and occupy this dwelling.**

**Office Use Only**

Permit Fee: \$ \_\_\_\_\_ SCC Levy: \_\_\_\_\_ Issuing Officer's Name: \_\_\_\_\_

Total Cost: \$ \_\_\_\_\_ (\$4.50 or 4% of the permit fee maximum \$560.00) Issuing Officer's Signature: \_\_\_\_\_

Receipt No.: \_\_\_\_\_ Designation No.: \_\_\_\_\_

Cash  Debit  Cheque \_\_\_\_\_ Permit Issue Date (mmm/dd/yyyy): \_\_\_\_\_