



COUNTY OF  
NEWELL

County of Newell  
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Brooks, Alberta, T1R 1B2  
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Please submit all permit applications to [development@newellmail.ca](mailto:development@newellmail.ca) for review and processing.

## PLUMBING PERMIT APPLICATION FORM

Development Permit Number: \_\_\_\_\_ Estimated Project Completion Date: \_\_\_\_\_

Building Permit Number (if applicable): \_\_\_\_\_ Project Value (labour and material): \$ \_\_\_\_\_

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

OWNER / APPLICANT: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

CONTRACTOR: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

### PROJECT LOCATION:

Municipality: \_\_\_\_\_ Subdivision / Hamlet Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Legal Land Description: LSD: \_\_\_\_\_ Part of: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ West of: \_\_\_\_\_

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_ Tax Roll Number: \_\_\_\_\_

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

### BUILDING TYPE:

- ☐ Residential  
☐ Commercial  
☐ Industrial  
☐ Institutional  
☐ Agricultural  
☐ Other (specify) \_\_\_\_\_

### TYPE OF WORK:

- ☐ New Work  
☐ Addition  
☐ Renovation, Alteration  
☐ Connection  
☐ Annual Permit  
☐ Other (specify) \_\_\_\_\_

### NUMBER OF FIXTURES:

Kitchen Sinks	_____	Grease Traps	_____
Basins	_____	Bidets	_____
Showers	_____	Water Fountains	_____
Laundry Tubs	_____	Urinals	_____
Water Closets	_____	Non-Potable Water Systems	_____
Automatic Washers	_____	Other (specify)	_____
Bathtubs	_____		_____
Floor Drains	_____	Total Fixtures	_____

DESCRIPTION OF WORK: \_\_\_\_\_

\_\_\_\_\_

Journeyperson's Name (print)

Journeyperson's Certificate Number

Journeyperson's Signature

Homeowner's Signature (homeowner permit only)

I hereby declare that I am the owner of the premises where the work will be conducted and/or currently reside or intend to reside on the property. I assume responsibility for ensuring compliance with the applicable Act and Regulations.

### OFFICE USE ONLY

### PAYMENT TYPE:

☐ Cheque ☐ Mastercard ☐ Visa ☐ Debit ☐ e-Transfer ☐ Invoice

Permit Fee: \$ \_\_\_\_\_

+ SCC Levy\*: \$ \_\_\_\_\_

= Total Cost: \$ \_\_\_\_\_ Receipt #: \_\_\_\_\_

\* \$4.50 or 4% of the permit fee maximum \$560.00

### APPLICATION DETAILS:

Application Date: \_\_\_\_\_

Permit Number: \_\_\_\_\_

The personal information provided as part of this application is collected under the authority of the Safety Codes Act, the Municipal Government Act, and in accordance with the Protection of Privacy Act (POPA) and the Access to Information Act (ATIA). This information is required and will be used for issuing permits, verifying and monitoring compliance with safety codes, and for property assessment purposes. Information related to your permit application and any permit(s) issued may be disclosed as allowed or required by law. If you have any questions about the collection or use of your personal information, please contact the Privacy Officer for the County of Newell at [administration@newellmail.ca](mailto:administration@newellmail.ca) or (403) 362-3266.