



TOWN OF SEXSMITH

Non-Residential Building Permit Application

9921-100 Street, Box 420, Sexsmith T0H
3C0 Ph: 780-568-0215 Fax: 780-568-2200
www.sexsmith.ca/assistcao@sexsmith.ca

Permit Number: PRBDC

Roll Number: _____

Application Date: _____ Development Permit Number: _____

Permit Type: ☐ Owner ☐ Contractor

Other Permits/Applications Required: ☐ Development ☐ Electrical ☐ Gas ☐ Plumbing ☐ PSDS

Landowner: _____

Mailing Address: _____

City: _____

Province: _____

Postal Code: _____

Phone: _____

Fax: _____

E-mail: _____

Applicant: _____

Mailing Address: _____

City: _____

Province: _____

Postal Code: _____

Phone: _____

Fax: _____

E-mail: _____

Contractor Name: _____

Mailing Address: _____

City: _____

Province: _____

Postal Code: _____

Phone: _____

Fax: _____

E-mail: _____

Legal

Lot: _____

Block: _____

Plan: _____

Part of: _____

¼ Sec: _____

Twp: _____

Rng: _____

W6M

Civic/Rural Address: _____

Subdivision Name: _____

Estimated Start Date: _____

Estimated Completion Date: _____

Project Value: _____

Project/Building

☐ Concrete ☐ Masonry ☐ Wood ☐ Steel ☐ Coverall ☐ Pole Shed

☐ Basement Parkade ☐ Above Ground Parkade ☐ Relocatable Structure

☐ Other _____

***Please check all that apply**

Type of Work:

☐ New Construction ☐ Renovation ☐ Relocation ☐ Addition

☐ Other _____

***Please check all that apply**

Intended Use:

☐ Commercial

☐ Industrial

☐ Institutional

☐ Other _____



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Project Details:	<u>Building Height (ft. or # of storeys):</u>	
	<u>Area: Building Area</u>	<u>sq. ft./sq. m.</u>
	<u>Finishing:</u>	<u>sq. ft./sq. m.</u>
	<u>Basement Parkade Area:</u>	<u>sq. ft./sq. m.</u>
	<u>Above Ground Parkade Area:</u>	<u>sq. ft./sq. m.</u>
Project Descriptions:		

Permit Applicant Declaration: The permit applicant hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations, all applicable Codes, and Municipal Bylaws. Work shall commence within 90 days from the date of the issuance of the permit and expires in accordance with the Town of Sexsmith's Uniform Quality Management Plan (QMP) without extension request. If the work authorized by the permit is suspended or abandoned for a period of 120 days at any time after the work has commenced, the permit will expire.

The personal information on this form is collected under the authority of Section 4(c) of the Protection of Privacy Act, Section 642 of the Municipal Government Act and /or the Safety Codes Act. The information will be used to process the application(s) and the names &/or address of where the development /use is being proposed may be made available to the public upon request or at a Public Council Meeting. If you have any questions on the collection and use of the information, please contact the Privacy Officer at 780-532-9722

I hereby certify that I am the owner or owner's agent of the property for this application. I have read and understood the statements printed on this form. I agree to all applicable laws in this jurisdiction.

<u>Applicant Name (Please Print)</u>		<u>Applicant Signature</u>	
<u>Development Officer Signature</u>		<u>Date</u>	
Application Fee:	<u>Sexsmith Portion of Permit Fee:</u>		
	<u>County Portion of Permit Fee:</u>		SSRV
	<u>Penalty:</u>		
	<u>Permit Fee Subtotal:</u>		
	<u>Safety Codes Council Levy:</u>		CR95
	<u>Other Fee:</u>		
	<u>Total Fee:</u>		
Payment Method:	☐ Cash ☐ Debit ☐ Cheque ☐ Invoice		