



Town of Ponoka
200, 5604-50 Street
Ponoka, AB T4J 1G5

Phone: (403) 783-4431
Fax: (403) 783-6745

Electrical Permit Application

Permit Label

eSITE Permit Number: 254254-_____

Other Permits Required: Building Plumbing Gas

Town Disconnect / Reconnect Required: Yes No Supply Service Required: Yes No

Permit Type: Owner Contractor Development Permit Number: _____

Application Date (M/D/Y): _____ Estimated Completion Date (M/D/Y): _____

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

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

Project Location: TOWN OF PONOKA **Street Address:** _____
Unit #: _____ **Lot:** _____ **Block:** _____ **Plan:** _____ **Subdivision Name:** _____
Legal Subdivision: Part of: _____ ¼ Sect: _____ Twp: _____ Rg: _____ W of: _____ Tax Roll #: _____
Directions: _____

Project Information: Commercial Residential Multi Family Industrial Institutional Oil & Gas
Type of Work: New Renovation Addition Accessory Building Basement Dev. Service Connection Only Temp Service
 Manufactured Home Alternative Energy (Town Approved Yes No) Other _____
Type of Service: Amps: _____ Voltage: _____ Phase: _____ U/G O/H
Main Floor: _____ sq. ft.
2nd Floor: _____ sq. ft.
Basement: _____ sq. ft.
Developed: Yes No
Garage: _____ sq. ft.
 Detached Attached

Detailed Description of Work:

Permit Applicant Declaration: The permit applicant certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations. 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 Town of Ponoka.

Master's Name (Please print) _____ Master's Signature _____ Homeowner's Signature (Homeowner permits only) _____
Master's Certification Number _____
Homeowner Declaration: By signing this permit I hereby certify that I own or will own and occupy this dwelling.

Project Value (Materials & Labour): \$ _____ **Total Developed Area:** _____ Sq. Ft
Permit Fee: \$ _____ ***SCC Levy:** \$ _____ **TOTAL FEE:** \$ _____
*SCC Levy is 4% with a minimum of \$4.50 and a maximum of \$560
Payment Method: Visa M/C Debit Cheque Cash **Authorization / Cheque Number:** _____
Credit Card #: _____ **Expiry Date:** _____ **Date of Authorization:** _____
Name of Cardholder: _____ **Signature of Cardholder:** _____