

A building permit is required for all factory built (metal) fireplaces, fireplace inserts, stoves, ranges, space heaters and solid fuel appliances (wood burning stove or pellet stove).

A gas permit is required for gas fuel appliances.

An electrical permit is required if the appliance is equipped with an electrical connection.

What to Submit when applying for a Building Permit

All forms and supporting documents (listed below) must be submitted at time of application.

Permit Application Form (Attached)

Consent Form (Attached) (only required if applicant is not home owner)

Building Permit Requirements

Provide a Floorplan showing

 \Box the proposed installation location for solid fuel burning appliance

 \Box flooring type appliance set on

 \Box clearance distance between the appliance and walls and/or structures

Available information from manufacturer

□ make / model number

□ Manufacturers installation manual showing Canadian testing agency approval

Fees (showing the location of the unit See Fee Schedule)

MUST BE PAID AT TIME OF APPLICATION (cheques payable to City of Beaumont)

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盤 BEAUMONT		ermit Applicatic	on			
Planning & Development 5600 - 49 Street Beaumont, AB T4X 1A1 780-929-8782 development@beaumont.ab.ca	DATE RECEIVED OFFICE USE ONLY	DATE PAID OFFICE USE ONLY	Note: You may apply for a Building Permit and/or a Development Permit with this one combo application. Electrical, Plumbing, and Gas Permits each have their own application forms.			
Property Information			OFFICE USE ONLY			
Street Address:			Permit Number:			
Plan:	Block:	Lot:	Mail 🗌 Pick-up 🗌			
Applicant and Property Owner Information			□ Authorization or ID Received			
Applicant/Contractor Name:			Land Use District:			
Mailing Address:			Tax Roll:			
Town:	Postal Cod	e:	Permitted Use			
Phone:	Cell Phone:		Permitted Use w/ Variance			
Email (required):			□ Discretionary Use			
		l out below – written horization from registered	Fees Receipt #:			
Registered Owner? De Yes (Do not fill out be		ner required)	Development Permit:			
Owner Name:			Building Permit:			
Mailing Address:			Safety Code Council:			
	Town: Postal Code:					
Phone:	Cell Phone:		Electrical Permit: SCC Electrical:			
Email (required):			Plumbing Permit:			
Proposed Development Construction Value:	<u>*</u>					
(Approximate cost of material & labour)	\$		SCC Plumbing: 			
I am applying for a: Development Permit AN	D/OR □Building Permit		Gas Permit:			
Check one of the following:			SCC Gas:			
Uncovered Deck ^{SQ FT:} Hot Tub ^{SQ F}	T: 🛛 Accessory Buildin	ng (Other than Garage) SQ FT:	Variance:			
Covered Deck SOFT:	ence** 🛛 Accessory Buildi	ng (Detached Garage) SQFT:	Notification Fee:			
□Other:	Basement Devel	opment [*] SQFT:	GST: Other:			
□Additional Dwelling Unit SQ FT:	Number of Bedrooms in	n Dwelling:				
□Home Based Business*** □Major □Minor	Business Name:		Total Fees:			
Has work on the above indicated item alread	ly commenced? □Yes □N	lo				
* No Development Permit required ** No Building Per		ness License also required, Building may be required				
Applicant Authorization						
 I am the owner/agent with the consent and authority of the owner that is the subject matter of this permit application. I hereby give my consent to allow any authorized person pursuant to the Municipal Government Act Section 542 the right to enter the land and/or building(s) with respect to this application only. I understand this is only an application and does not constitute approval to commence construction. I declare that the information contained in this application is correct and true to the best of my knowledge. I declare that I will notify the Development Authority of any proposed changes to the plans submitted with this application. I consent to receiving notifications & correspondence regarding this application via email to the address provided on this application. By checking the "I agree" box above, you agree and authorize your electronic signature to be valid and binding upon you to the same force and effect as a handwritten signature. 						
Electronic Signature:		Date:				
OFFICE USE ONLY						
Development Permit						
Date Deemed Complete:		Date of Decision:				
Building Permit		(See attached Notice of Decision)				
See Attached Report						
Safety Codes Officer:	Designatio	n No	Date:			

The personal information requested on this form is being collected under the authority of Section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act. The information collected will be used for the purpose of permit review and inspection processes and may be communicated to relevant City Business Units, utility providers, and Alberta Health Services. It may also be used to conduct ongoing evaluations of services received from City Business Units. The name of the applicant and the nature of the permit will be available to the public. If you have any questions about the collection or use of your personal information, contact the City of Beaumons' FOIP Cond'alth Street, Beaumont, Alberta, TAX 1A1 or 780.928782. M:\0550 - Development, Land Use\Forms\Permit Packages and Forms\Residential Application Packages and Forms\F_Permit Forms - Residential Permits.docx Updated: 2022-07-01

BEAUMONT

5600 - 49 Street Beaumont, Alberta T4X 1A1 Phone: (780) 929-8782 Fax: (780) 929-3300 Email: development@beaumont.ab.ca

DEVELOPMENT / BUILDING PERMIT AUTHORIZATION FORM

OWNER INFORMATION

I (We),	
(name(s) of Registered Land Owner	(s)
being the registered land owners of:	
Municipal Address:	Postal code
Legal Description:	
Owner Phone number:	
Owner Email:	
Do hereby authorize:	
APPLICANT INFORMATION	
Company:	
Contact Name:	
Address:	Postal code
Phone:	
Email:	
to make application for the necessary building / de following project:	
For Commercial Only:	
Owner is responsible for all costs associated v	with water metering changes, including all
piping, and removal and/or replacement of w	ater meter(s). Changes are required to wate
meter (please circle) Yes No	

(Print name of Registered Land Owner)

(Print name of Registered Land Owner)

(Signature of Registered Land Owner)

(Signature of Registered Land Owner)

Date

Date

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5	AFETY CODES INC.			Permit ication	ſ	F	Permit Label
Permit Type:	ed Permits: Duildin Owner Contra Date (M/D/Y):	ctor	🗌 Plu	mbing D PSDS Development Permit Estimated Completio			
Owner:				Mailing Address:			
City:		Prov.:	i .	Postal Code:	Phon	e:	
Cell Number:		_ Email Address:			Fa	x:	
Contractor:				Mailing Address:			
City:		Prov.:	i	Postal Code:	Pho	one:	
Cell Number:	l <u>e</u>	Email Address:			F	ax:	
Project Loca	tion: Name of Municipalit	y:					
	al Address:						
	#: Lot:						
0.08	ision: Part of:		Twp:	Rge:	W of:		
Type of Wor	mation: Commercial k: New Renovations of Work:	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -			101 - 101		Replacement
the second contracts	Natural Gas	and the second state					
	# Water Heaters: # Ranges						
	on-residential):		<i>#</i>				cis
Propane Tar Serial Numbe		Existing #	Tank Sets		Tank Size	e:	
work will comm liable for any d	ant Declaration: The permit app ence within 90 days. The permit ecision related to the system of in which they are carried out. The p	applicant/owner acknow spections, examinations	ledges that , evaluations	as per Section 12(2) of the Albe s and investigations including but	rta Safety Code: t not limited to a	s Act; Supe decision re	rior Safety Codes Inc. is not lating to their frequency and
Journeyman'	s Name (Please print)	Journeyn	nan's Signa			•	Ire (Homeowner permits only)
Journeyman'	s Certification Number:						signing this permit I hereby and occupy this dwelling.
*SCC Levy is 4'	\$ *SCC L % of the permit fee with a minimu hod: Visa M/C	im of \$4.50 and a maximu	um of \$560				
Credit Card #	:		E:	xpiry Date:	Date of Au	uthorization	n:
Name of Car	dholder:		Si	gnature of Cardholder:			
	ation Section to be comple	2			cting SCO: _		
Permit Issuer	's Name (print or type)		Pen	mit Issuer's Signature			-
Permit Issuer	's Designation Number:		_ Date	e of Issue (M/D/Y):			
Calgary Edmonton Fort McMurray Grande Prairie Lethbridge Lloydminster Red Deer	25, 2015 – 32 Avenue NE 14613 – 134 Avenue 165, 101 Signal Road 1 st Floor 10525 – 100 Avenue 422 North Mayor Magrath Dr. Bay 1, 2914 – 50 Avenue 3, 6264 – 67A Street	T2E 6Z3 Ph: 403. T5L 4S9 Ph: 780. T9H 4N6 Ph: 780. T8V 0V8 Ph: 780. T1H 6H7 Ph: 403. T9V 2S5 Ph: 780. T4P 3E8 Ph: 403.	715.7726 882.8777 320.0734 870.9020	Toll Free Ph: 1.888.717.2344 Toll Free Ph: 1.866.999.4777 Toll Free Ph: 1.877.715.7726 Toll Free Ph: 1.877.882.8777 Toll Free Ph: 1.877.320.0734 Toll Free Ph: 1.888.358.5545	Fax: 780.48 Fax: 780.71 Fax: 780.88 Fax: 403.320 Fax: 780.87	9.4711 7 5.7731 7 2.7677 7 0.9969 0.9036	Foll Free Fax: 1.888.717.2340 Foll Free Fax: 1.866.900.4711 Foll Free Fax: 1.877.815.7731 Foll Free Fax: 1.877.882.8775 Foll Free Fax: 1.866.358.5085 Revised: Jan. 22, 14



Residential Gas Permits

Applications

In order to issue a gas permit, the applicant must submit:

- Completed permit application
- Method of payment

Eligibility

• The applicant may be the owner and occupant of the property or a Certified Gas Contractor. This is the person to whom the permit is issued.

Typical Site Inspections Stages

Final: prior to occupancy, all gas piping installed, pressure test completed, gas meter hung, appliances firing

We request that you provide our office with 48 hours notice to arrange for the necessary inspections. Please contact your Local office listed below.

25, 2015 - 32 Avenue N.E.	T2E 6Z3	Tel: 403.717.2344	Fax: 403.717.2340	Toll Free Phone: 1.888.717.2344
14613 - 134 Avenue	T5L 4S9	Tel: 780.489.4777	Fax: 780.489.4711	Toll Free Phone: 1.866.999.4777
165, 101 Signal Road	T9H4N6	Tel: 780.715.7726	Fax: 780.715.7731	Toll Free Phone: 1.877.715.7726
1st Floor 10525 - 100 Avenue	T8V 0V8	Tel: 780.882.8777	Fax: 780.882.7677	Toll Free Phone: 1.877.882.8777
Bay 1, 2914 - 50 Avenue	T9V 2S5	Tel: 780 870 9020	Fax: 780 870 9036	
3, 6264 - 67 A Street	T4P 3E8	Tel: 403.358.5545	Fax: 403.358.5085	Toll Free Phone: 1.888.358.5545
	14613 – 134 Avenue 165, 101 Signal Road 1st Floor 10525 - 100 Avenue Bay 1, 2914 – 50 Avenue	14613 – 134 Avenue T5L 4S9 165, 101 Signal Road T9H4N6 1st Floor 10525 - 100 Avenue T8V 0V8 Bay 1, 2914 – 50 Avenue T9V 2S5	14613 - 134 Avenue T5L 4S9 Tel: 780.489.4777 165, 101 Signal Road T9H4N6 Tel: 780.715.7726 1st Floor 10525 - 100 Avenue T8V 0V8 Tel: 780.882.8777 Bay 1, 2914 - 50 Avenue T9V 2S5 Tel: 780.870 9020	14613 - 134 Avenue T5L 4S9 Tel: 780.489.4777 Fax: 780.489.4711 165, 101 Signal Road T9H4N6 Tel: 780.715.7726 Fax: 780.715.7731 1st Floor 10525 - 100 Avenue T8V 0V8 Tel: 780.882.8777 Fax: 780.882.7677 Bay 1, 2914 - 50 Avenue T9V 2S5 Tel: 780.870 9020 Fax: 780.870 9036

SAFETY CODES IN PERMITS & INSPECTION	NC.	lectrica Applio	al Permit		Permit Label
Other Required Permits: Bu Permit Type: Owner O Application Date (M/D/Y):	Contractor		Development Permit	Number: _	e Required:
Owner:			Mailing Address:		
City:	Prov		Postal Code:	Pho	ne:
Cell Number:	Email Address:			F	ax:
Contractor:			Mailing Address:		
City:	Prov		Postal Code:	P	none:
Cell Number:					
Project Location: Name of Munic	ipality:				
Street or Rural Address:					
Unit or Suite #: Lot:	Block:	Plan:	Tax Roll	#:	
Legal Subdivision: Part of:	¼ Sect:	Twp:	Rge:	W of:	
		_	Family 🗌 Industrial 🗌	1	
Detailed Description of Work:				2 nd Flor Dev. B	loor:sq. ft. pr:sq. ft. asement:sq. ft. pd Garage:sq. ft.
Permit Applicant Declaration : The and work will commence within 90 days. not liable for any decision related to the s and the manner in which they are carried	The permit applicant/owner a ystem of inspections, examin	cknowledges th ations, evaluat	hat as per Section 12(2) of the Al ions and investigations including	berta Safety but not limite	Codes Act; Superior Safety Codes Inc. is d to a decision relating to their frequency
Master's Name (Please print) Master's Certification Number		er's Signature	Home	eowner Decla	er's Signature (Homeowner permits only) aration: By signing this permit I hereby or will own and occupy this dwelling.
Project Value (Materials & Labour): Permit Fee: \$ *S		_ TOTAL F			oped Area:Sq. Ft
*SCC Levy is 4% of the permit fee with a r Payment Method: Visa N			Authorization / Cheque Nur	nber	
Credit Card #:	24 X	Expiry	/ Date: [Date of Auth	orization:
Name of Cardholder:		Signa	ture of Cardholder:		2
Permit Validation Section to be co				· · · · · · · · · · · · · · · · · · ·	SCO:
Special Conditions:					
Permit Issuer's Name (print or type)		 Per	mit Issuer's Signature		
Permit Issuer's Designation Number	ı		e of Issue (M/D/Y):		
Calgary 25, 2015 – 32 Avenue 1 Edmonton 14613 – 134 Avenue Fort McMurray 165, 101 Signal Road Grande Prairie 1 ⁴¹ Floor 10525 – 100 A Lethbridge 422 North Mayor Magra Loydminster Bay 1, 2914 – 50 Avenue Red Deer 3, 6264 – 67A Street	T5L 4S9 Ph: 7 T9H 4N6 Ph: 7 venue T8V 0V8 Ph: 7 th Dr. T1H 6H7 Ph: 40 Je T9V 2S5 Ph: 7	03.717.2344 80.489.4777 80.715.7726 80.882.8777 03.320.0734 80.870.9020 03.358.5545	Toll Free Ph: 1.888.717.2344 Toll Free Ph: 1.866.999.4777 Toll Free Ph: 1.877.715.7726 Toll Free Ph: 1.877.882.8777 Toll Free Ph: 1.877.320.0734 Toll Free Ph: 1.888.358.5545	Fax: 780 Fax: 780 Fax: 780 Fax: 403. Fax: 780	717.2340 Toll Free Fax: 1.868.717.23 489.4711 Toll Free Fax: 1.866.900.47 715.7731 Toll Free Fax: 1.877.815.77 820.7677 Toll Free Fax: 1.877.82.87 320.9969 870.9036 358.5085 Toll Free Fax: 1.866.358.50 Revised: April 23, 21



Residential Electrical Permits

Applications

In order to issue an electrical permit, the applicant must submit:

- Completed permit application
- Method of payment

For electrical installations with a value over \$25, 000.00 two sets of electrical drawings must be submitted with the permit application.

Eligibility

• For a single-family dwelling, the applicant may be the owner and occupant of the property, or may be a contractor who holds a Master Electrician Certificate. Service must be 200 amps or less for a home-owner permit. This is the person to whom the permit is issued.

Typical Site Inspections Stages

Rough-in: prior to drywall, all wire and boxes installed and visible, main service installed, bonding and grounding complete

Final: prior to occupancy, all load devices and switches installed and operational, smoke detectors installed, panel labeled.

We request that you provide our office with 48 hours notice to arrange for the necessary inspections. Please contact your Local office listed below.

	05 00/5 00 N F	TOF 070	T 1 100 717 0011		
Calgary:	25, 2015 - 32 Avenue N.E.	T2E 6Z3	Tel: 403.717.2344	Fax: 403.717.2340	Toll Free Phone: 1.888.717.2344
Edmonton:	14613 - 134 Avenue	T5L 4S9	Tel: 780.489.4777	Fax: 780.489.4711	Toll Free Phone: 1.866.999.4777
Fort McMurray:	165, 101 Signal Road	T9H4N6	Tel: 780.715.7726	Fax: 780.715.7731	Toll Free Phone: 1.877.715.7726
Grande Prairie:	1st Floor 10525 - 100 Avenue	T8V 0V8	Tel: 780.882.8777	Fax: 780.882.7677	Toll Free Phone: 1.877.882.8777
Lloydminster:	Bay 1, 2914 - 50 Avenue	T9V 2S5	Tel: 780 870 9020	Fax: 780 870 9036	
Red Deer:	3, 6264 - 67 A Street	T4P 3E8	Tel: 403.358.5545	Fax: 403.358.5085	Toll Free Phone: 1.888.358.5545