



REGIONAL MUNICIPALITY
OF **WOOD BUFFALO**

**REGIONAL MUNICIPALITY OF WOOD BUFFALO
FIRE PREVENTION BRANCH
APPLICATION FOR PERMIT/SERVICE**

Type of Permit: _____

Permit Location(s) Applicable: _____

Legal Description of Property: _____

Company Name: _____ Company Phone Number: _____

Full Address: _____

Contact Name: _____ Contact Phone Number: _____

Email Address: _____ Business License Number: _____

Emergency Contact Name: _____ Phone Number: _____

Permit Use: Annual ☐ Single Event ☐ Monthly ☐ _____ (months)

Requested Permit Commencement Date: _____

The undersigned hereby applies for the above in accordance with the Alberta *Fire Code Regulation* and the Regional Municipality of Wood Buffalo By-laws and requirements.

Printed Name

Signature

The personal information on this form is collected under the authority of Section 33 (c) of the Alberta Freedom of Information and Protection of Privacy Act. The personal information will be used for inspection, billing and issuing purposes. If you have any questions regarding the collection or use of this information, contact the Fire Prevention Branch, Fire Hall # 5, 200 Saprae Creek Trail T9H 4P1, or call 780-792-5519.

FOR OFFICE USE ONLY

Date/Time Application Received: _____ Total Fee: \$ _____

Received By: _____ Invoice Date: _____

Receipt Number: _____ (Cash, Cheque, Debit or Credit)

Please send the complete application to RESFire.PreventionBranch@rmwb.ca

**Regional Municipality of Wood Buffalo
Fire Prevention Branch**
200 Saprae Creek Trail, Fort McMurray, Alberta, T9H 4P1
www.rmwb.ca/fireprevention

