

APPLICANT: \_\_\_\_\_ Email: \_\_\_\_\_

## REQUIRED INFORMATION FOR PERMIT APPLICATIONS

### CHECKLIST FOR SUMP PUMP TO SANITARY CONNECTION PERMIT APPLICATION

This application checklist shall be **completed** and **attached** to your Permit application. All of the required information is necessary for the review of the application and for a timely decision to be rendered.

To expedite the evaluation your application must have:

- All submission requirements to be included in the application.
- All application documents must be clear, legible, precise, and be prepared to professional drafting standards.
- Where Engineering is required, all plans shall be stamped and signed by the registered professional responsible for design.
- Every document submitted must have a title block with the project name, legal and municipal address, and the name and phone number of the designer.

If the information is determined to be inadequate, the application shall be considered **incomplete**; and it will not proceed to review until the requirements have been satisfied.

**All boxes shall be "CHECKED" and information indicated attached to the application.**

OFFICE	CLIENT	APPLICATION SUBMISSION REQUIREMENTS	COMMENTS
<input type="checkbox"/>	<input type="checkbox"/>	<b>1. Plumbing Permit Application:</b> "A permit in the plumbing discipline is required to install, alter, or add to a plumbing system" as per the Permit Regulations of Alberta.	
<input type="checkbox"/>	<input type="checkbox"/>	<b>2. Variance Request Application:</b> a. The Variance Application Form must be completed in full and bear an original signature. b. All handwritten text must be legible.	
<input type="checkbox"/>	<input type="checkbox"/>	<b>3. Proposed Installation Drawings:</b> The drawing shall clearly indicate: a. Planned piping layout. b. Valve locations. c. Direction of flow.	
<input type="checkbox"/>	<input type="checkbox"/>	<b>4. Confirmation or Proof of Excess Water Issue:</b> Site visit by a Safety Codes Officer required prior to the issuance (at the discretion of the Safety Codes Officer).	
<input type="checkbox"/>	<input type="checkbox"/>	<b>5. Water Analysis Results:</b> A water sample is to be collected and analyzed by an accredited laboratory to confirm whether the source is groundwater rather than a leak from the potable water system.	
<input type="checkbox"/>	<input type="checkbox"/>	<b>6. Declaration Form:</b> Provide a description of the hazard present (ie. Ice formation creating a slip hazard on a public walkway).	
<input type="checkbox"/>	<input type="checkbox"/>	<b>7. Applicable Fees:</b> Permit fees (as outlined in the Fees, Rates, and Charges Bylaw, as amended) shall be made payable to the Regional Municipality of Wood Buffalo.	

You will receive email notification upon issuance of Permit. Conditions will be attached to the Permit. The work is required to comply with all conditions attached to the permit. It is imperative that the applicant carefully read and understand all the Permit conditions.

The personal information collected is authorized under Section 4 (c) of the *Protection of Privacy Act* and is managed in accordance with the *Act*. It will be used as contact information and to process your application. If you have any questions regarding the collection or use of this information, please contact PULSE at 780-743-7000, 1-800-973-9663, or online at [rmwb.ca/pulse](http://rmwb.ca/pulse).



# Plumbing Permit Application



Permit Type:  Owner  Contractor

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

Application Date (M/D/Y): \_\_\_\_\_

Estimated Completion Date (M/D/Y): \_\_\_\_\_

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

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

REGIONAL MUNICIPALITY OF WOOD BUFFALO

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

Unit #: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_

Legal Subdivision: Part of: \_\_\_\_\_ ¼ Sect: \_\_\_\_\_ Twp: \_\_\_\_\_ Rg: \_\_\_\_\_ W of: \_\_\_\_\_ Subdivision: \_\_\_\_\_

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

Project Information:  Commercial  Residential  Multi-Family  Industrial  Institutional  Oil & Gas  Agriculture

Type of Work:  New  Renovation  Addition  Manufactured Home  Temp Heat  Replacement

Description of Work: \_\_\_\_\_

Plumbing (Insert number of each item):		Total Developed Area _____	
# Kitchen Sinks: _____	# Laves/Wash Basins: _____	# Showers: _____	# Laundry Tubs: _____
# Toilets: _____	# Washing Machine: _____	# Bathtubs: _____	# Floor Drains: _____
# Sumps: _____	# Bar Sink: _____	# Urinals: _____	# Other Fixtures: _____
# of Drops (Mobile): _____	# Water/Sewer Connection: _____	# Roof Leaders: _____	Total # of Fixtures: _____

Permit Applicant Declaration: The permit applicant certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations and work will commence within 90 days. The permit applicant acknowledges this permit may expire in one (1) year unless extended in writing by a Safety Codes Officer. The permit applicant/owner acknowledges that as per Section 12(2) of the Alberta Safety Codes Act; The Regional Municipality of Wood Buffalo is not liable for any decision related to the system of inspections, examinations, evaluations and investigations including but not limited to a decision relating to their frequency and the manner in which they are carried out. The personal information provided on this form is subject to the provisions of the Protection of Privacy Act.

\_\_\_\_\_  
 Journeyman's Name (Please print)                      Journeyman's Signature                      Homeowner's Signature (Homeowner permits only)

\_\_\_\_\_  
 Journeyman's Certification Number                      Journeyman's Contact Number

Permit Fee: \$ \_\_\_\_\_ \*SCC Levy: \$ \_\_\_\_\_ TOTAL FEE: \$ \_\_\_\_\_

\*SCC Levy is 4% of the permit fee with a minimum of \$4.50 and a maximum of \$560

Payment Method:

Visa  M/C  Debit  Cheque  Cash  Authorization/CVC/Cheque Number \_\_\_\_\_

Credit Card #: \_\_\_\_\_ CVC: \_\_\_\_\_ Expiry Date: \_\_\_\_\_ Date of Authorization: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_ Signature of Cardholder: \_\_\_\_\_

# Building Permit Application



## Permit Terms and Conditions

1. Inspections are required for all permits; and it is the applicant's responsibility to request the inspection when the work is ready. Contact 780-743-7813 or email [inspections@rmwb.ca](mailto:inspections@rmwb.ca).
2. Permits will be expired if:
  - a. Work does not commence within 90 days of permit issuance, or
  - b. Work is suspended or abandoned for a period of 120 days, or
  - c. Work is not completed within 1 year from issuance. One-time permit extensions may be granted where applicable.
3. This permit is only applicable to the work detailed in the Description of Work and all other work completed, that is not listed on this permit, will not be in non-compliance with the **Alberta Safety Codes Act**.
4. The permit holder is responsible to notify the permit issuer and has the right to cancel the permit. Contact the permit issuer if the following occurs:
  - a. If the permit holder does not intend to complete the undertaking, or
  - b. If there is a change in ownership from the owner as stated on the permit application.
5. The permit issuer has the right to cancel your permit if it is found the permit was issued in error due to incorrect or insufficient information in respect to the permit.
6. There are no refunds on permit fees once the permit has been processed.
7. No person shall deviate or authorize a deviation from a permit, or terms or conditions of a permit, without first obtaining the written permission of the permit issuer.
8. The permit holder will ensure that the construction site is identified.
9. The permitted work requires the approval of a Safety Codes Officer before any part of the building or system is covered or concealed. If required by a Safety Codes Officer, the owner shall uncover and replace at the owner's expense.
10. Permits must be inspected and be compliant prior to the use and/or occupancy.
  - a. Commercial, Industrial and Institutional projects must have all applicable electrical, plumbing, gas and ventilation permits inspected and compliant prior to issuance of the Occupancy Certificate. A final building inspection may be required prior to the issuance of the Occupancy Certificate.
  - b. Residential projects must have all applicable electrical, plumbing, gas, and ventilation permits inspected and compliant prior to the final building Occupancy inspection.
11. The installation of CSST gas piping is required to be completed by a certified installer and proof of certification will be required at the time of inspection.
12. Homeowners that obtain permits must complete the work and will be taking responsibility for ensuring the undertaking complies with the applicable codes and standards. The permit issuer will cancel the Homeowner trade permit if:
  - a. A contractor is found completing the work.
  - b. You are not the registered owner of the residential premises in which the work is being performed.
  - c. You do not permanently reside 'in' or will reside 'in' the premises.
13. Only the permit applicant, representative of the applicant or owner is permitted to inquire about permit information, receive permit information and request inspections.
14. Re-inspection fees will be applied to the permit record and no further inspections will be permitted until the fees have been paid, if:
  - a. The inspector is unable to complete an inspection due to unsafe access, no entry or unable to locate the site.
  - b. Deficiencies from a previous inspection were not corrected at the time of the re-inspection.

## Permit Declaration

The permit applicant/owner acknowledges that the installation will be completed in accordance with the Alberta Safety Codes Act, Permit Regulations and Regional Municipality of Wood Buffalo Permit Policy. The personal information provided on this form is subject to the provisions of the Protection of Privacy Act. Your personal information will be used to process your application(s). Please be advised that your name, address and details related to your permit may be included on reports that are available to the public as required or allowed by legislation.

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Applicant Name

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Applicant Signature

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Date

<b>Request for Specific Variance</b>	
Explanation of Variance	A Variance is written permission issued to build, install, process, or otherwise act in a manner not consistent with the provision of an applicable code but which provides, in the opinion of the issuing Administrator or Safety Codes Officer, an equivalent or greater level of safety to persons and property. A Variance issued by a Safety Codes Officer is specific. A Variance sets no precedent.
Date of Request	
Name and address of owner and/or owner's agent requesting variance	
Code or Standard to be varied	
Details of proposed variance	
Reason for Variance	
Supporting documentation must be provided (proof of equal or better safety performance – list attachments)	
Address and/or legal description of the property upon which the thing, process or activity which is the subject-matter of the variance is located	<hr style="width: 20%; margin: 0 auto;"/> lot / block / plan
Declaration of Understanding	By signing below, the owner or owner's agent expressly acknowledges that the owner is aware of and agrees with this request for variance, which is intended to provide an alternative to the strict provisions of the Code / standard / regulation, and that it is the responsibility of the owner to provide and maintain safety in accordance with the variance.
Advisement of Offence	Non-compliance with the requirements of a Variance is an offence under the Safety Codes Act.
Identification of owner or owner's agent	<hr style="width: 20%; margin: 0 auto;"/> Signature <hr style="width: 20%; margin: 0 auto;"/> Print



## Foundation Drainage System Alternative Connection Declaration

I/We \_\_\_\_\_, being the registered property owner(s) of the property located at municipal street address \_\_\_\_\_ in the Regional Municipality of Wood Buffalo, in the Province of Alberta;

Understand the following responsibilities, but not limited to, associated with connecting our building storm water collection system into the municipal sanitary system;

- Responsible to ensure the operation and maintenance of the sump pump,
- Responsible for annual maintenance of the sanitary and storm water back flow preventers,
- Will ensure the downspouts are directing the rainwater away from the building and not onto neighboring properties,
- Will ensure that the valving is reversed from May 1<sup>st</sup> to October 31<sup>st</sup> to allow storm to flow to exterior of home,
- Will not alter the connection without the Plumbing Safety Codes Officer approval.

I/We acknowledge that the failure in complying with any of the above items or are non-compliant with any other legislative requirements or bylaws or are negligent in addressing any issues related to the connection of the sanitary system, will be responsible for any damages that occur.

I/We \_\_\_\_\_ understand and accept the responsibilities and risks associated with the connection to the Municipal sanitary system.

\_\_\_\_\_  
SIGNATURE OWNER(S)

\_\_\_\_\_  
Date (dd/mm/yyyy)