



Town of Bow Island
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The Inspections Group Inc
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Please submit all permit applications to south@inspectionsgroup.com for review and processing.

BUILDING PERMIT APPLICATION FORM

Development Permit Number: _____

Estimated Project Completion Date: _____

New Home Warranty Number (if applicable): _____

Project Value (labour and material): \$ _____

Applicant Type: ☐ Owner ☐ Contractor

Work: ☐ has not started ☐ is in progress ☐ is complete

OWNER / APPLICANT: _____ Mailing Address: _____

City: _____ Prov: _____ Postal Code: _____ Phone: _____ Fax: _____

Cell: _____ Email: _____

CONTRACTOR: _____ Mailing Address: _____

City: _____ Prov: _____ Postal Code: _____ Phone: _____ Fax: _____

Cell: _____ Email: _____

PROJECT LOCATION:

Municipality: _____ Subdivision / Hamlet Name: _____

Street Address: _____

Legal Land Description: LSD: _____ Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____

Lot: _____ Block: _____ Plan: _____ Tax Roll Number: _____

Directions: _____

BUILDING TYPE:

- ☐ Single Family Residential
- ☐ Multi-Family Residential
- ☐ Basement Development
- ☐ Secondary Suite
- ☐ Wood-Burning Appliance
- ☐ Deck
- ☐ Accessory Building
- ☐ Swimming Pool, Hot Tub
- ☐ Roof-Mounted Solar
- ☐ Other (specify) _____

TYPE OF WORK:

- ☐ New Construction
- ☐ Relocation
- ☐ Addition
- ☐ Renovation
- ☐ Demolition
- ☐ Change of Occupancy
- ☐ Manufactured Home*
- ☐ Modular Home*

*CSA #: _____

*S/N #: _____

BUILDING USE:

- ☐ Residential
- ☐ Commercial
- ☐ Industrial
- ☐ Institutional
- ☐ Oil & Gas
- ☐ Other (specify) _____

BUILDING AREA:

☐ m² ☐ ft²

Main Floor _____

Second Floor _____

Third Floor _____

Basement _____

Developed: ☐ Yes ☐ No

Garage _____

Total Area _____

Deck _____

Porch, Veranda _____

Other (specify) _____

DESCRIPTION OF WORK: _____

Permit Applicant's Name (print)

Permit Applicant's Signature

Homeowner's Signature (homeowner permit only)

I hereby declare that I am the owner of the premises where the work will be conducted and/or currently reside or intend to reside on the property. I assume responsibility for ensuring compliance with the applicable Act and Regulations.

TIGI OFFICE USE ONLY

PAYMENT TYPE:

☐ Cheque ☐ Mastercard ☐ Visa ☐ AMEX ☐ Interac ☐ e-Transfer ☐ Invoice

Permit Fee: \$ _____

+ SCC Levy*: \$ _____

= Total Cost: \$ _____

Receipt #: _____

APPLICATION DETAILS:

Application Date: _____

Permit Number: _____

* \$4.50 or 4% of the permit fee maximum \$560.00

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 Municipality.