



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](mailto:south@inspectionsgroup.com) for review and processing.

### PLUMBING PERMIT APPLICATION FORM

Development Permit Number: \_\_\_\_\_ Estimated Project Completion Date: \_\_\_\_\_  
 Building Permit 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:	TYPE OF WORK:	NUMBER OF FIXTURES:	
<input type="checkbox"/> Residential	<input type="checkbox"/> New Work	Kitchen Sinks _____	Grease Traps _____
<input type="checkbox"/> Commercial	<input type="checkbox"/> Addition	Basins _____	Bidets _____
<input type="checkbox"/> Industrial	<input type="checkbox"/> Renovation, Alteration	Showers _____	Water Fountains _____
<input type="checkbox"/> Institutional	<input type="checkbox"/> Connection	Laundry Tubs _____	Urinals _____
<input type="checkbox"/> Agricultural	<input type="checkbox"/> Annual Permit	Water Closets _____	Other (specify) _____
<input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Other (specify) _____	Automatic Washers _____	_____
		Bathtubs _____	Total Fixtures _____
		Floor Drains _____	

**DESCRIPTION OF WORK:** \_\_\_\_\_

Journeyperson's Name (print) \_\_\_\_\_ Journeyperson's Certificate Number \_\_\_\_\_ Journeyperson'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:**  
**Date Received:** \_\_\_\_\_  
**Permit Number:** \_\_\_\_\_

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