



5 St. Anne Street
St. Albert, AB T8N 3Z9
Phone: 780-459-1642
Fax: 780-458-1974
Email: development@stalbert.ca

CITY USE ONLY	
Application Fee	
Building Permit Deposit	
Safety Code Fee	
Total Fees	☐ Paid
Receipt No.	

APPLICATION FOR DEVELOPMENT PERMIT
PLEASE PRINT

I/We hereby make application under the provisions of the Land Use Bylaw to develop in accordance with the plans and information submitted, and which form a part of this application.

Municipal Address:			
Legal Description:	Lot (Parcel)	Block	Plan
	Other legal description		
Development Proposed:			
Applicant:	Name	Daytime Phone	
	Mailing Address	Email	
	City	Postal Code	Date (MM/DD/YYYY)
Landowner:	Name	Daytime Phone	
	Mailing Address	Email	
	City	Postal Code	Date (MM/DD/YYYY)

By signing this form, the applicant declares that the development identified in this Application will be conducted in accordance with the plans submitted and, upon approval, will adhere to the conditions and provisions of the Land Use Bylaw. The applicant further declares that they WILL NOTIFY the Development Authority of any proposed changes to the plans submitted with this Application.

Signature of Applicant

Date of Application

IMPORTANT NOTICE: This Application does not permit you to commence any development until such time as the Development Authority has issued a Development Permit. It is understood that if this application is approved or refused by the Development Officer, it may be appealed to the Subdivision & Development Appeal Board if such appeal is made within 21 days from the notice of decision date. It is further understood that the Subdivision & Development Appeal Board may confirm, revoke or vary the development permit or any condition as a result of such an appeal being duly filed, and that any work undertaken prior to the expiry of the appeal period or the determination of the appeal by the Subdivision & Development Appeal Board, whichever case applies, is entirely at the applicant's risk.

Collection and Use of Personal Information

Personal information is collected under the authority of s. (33) of the Freedom of Information and Protection of Privacy Act. This information will be used for the purpose of processing permit applications. If you have any questions about the collection, use, or disclosure of this information, contact the Director of Planning and Development, St. Albert at 780-459-1642.



Building Inspection Services

5 St. Anne Street
St. Albert AB T8N 3Z9

Phone: (780) 418-6601
Fax: (780) 458-1974
E-mail: BIS@stalbert.ca

Collection and use of personal information

The information on this form is collected by the City of St. Albert for the purpose of processing permit applications. The use, retention and/or disclosure of such information shall be in strict compliance with the Freedom of Information and Protection of Privacy Act (and any other legislation governing the use and disclosure of information).

Building Permit
Deposit ☐
Fee ☐

Safety Code Fee

Total Fees

Paid By:
Receipt #:

BUILDING PERMIT APPLICATION

NEW CONSTRUCTION / IMPROVEMENT / CHANGE OF USE / OCCUPANCY / DEMOLITION

Municipal Address of Property _____ Unit # _____

Description of Property: Lot(s) _____ Block _____ Plan _____

Business Name _____

Project _____ Occupancy Date ____ / ____ / ____

Previous Use _____

Applicant Details

Applicant Name _____

Mailing Address _____

City _____ Province _____ Postal Code _____

Contact _____ Phone _____ * Email _____

*Mandatory Field

Interest of Applicant (e.g. owner, contractor, architect) _____ Bus. Lic. No. _____

Property Owner Name _____ Phone _____

Project Details

New Construction ☐ Interior / Exterior Alterations / Addition ☐ Change of Use / Occupancy ☐ Demolition ☐

Total Floor Area Being Occupied _____ *Construction Value of Work \$ _____

Description of work to be completed _____

Does Project Involve:

Plumbing Work? Yes ☐ Contractor _____ Phone _____

Gas Work? Yes ☐ Contractor _____ Phone _____

Heating & Ventilation? Yes ☐ Contractor _____ Phone _____

Electrical Work? Yes ☐ Contractor _____ Phone _____

Fire Sprinkler Work? Yes ☐ Contractor _____ Phone _____

Additional information or drawings may be required as considered necessary to make a decision on your application.

Note: A site plan and floor plan or construction drawings must be submitted with all applications.

Note: In the event any work is commenced prior to issuance of an applicable permit, the fees shall be DOUBLED. Any work covered prior to inspection shall be uncovered at the inspector's discretion.

Signature X _____ Date _____



5 St. Anne Street
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Phone: 780-459-1642
Development email: development@stalbert.ca
Business Licensing email: licensing@stalbert.ca | [Contact Business Licensing](#)

CITY OF ST. ALBERT - OWNER'S AUTHORIZATION

Date: _____

File No.: _____

MUNICIPAL GOVERNMENT ACT, RSA, 2000, CHAPTER M-26

(PLEASE PRINT)

I, _____
(owner's name)

of _____
(company, if applicable)

being the registered owner of _____
(civic address)

(legal description)

do hereby allow _____
(applicant – please print)

To make application for:

☐ **Development Permit**
(Includes, but is not limited to: Sign Permits, Change of Use and/or New Occupancy, etc.)

(other description if required)

☐ **Permits issued under the Safety Codes Act (Building, Electrical, Plumbing, Gas & HVAC)**

☐ **Business Licence Application (whether as a lessee, contractor, agent or resident)**

(owner's name – please print)

(owner's signature)

(applicant's name – please print)

(applicant's signature)

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