



ELECTRICAL PERMIT APPLICATION TO INSTALL

Phone: 780-418-6601
Fax: 780-458-1974

Complete Form - Save to a File - Then E-Mail to: BIS@stalbert.ca

Date: _____ 20____ Business Licence #. _____

Location: _____ Unit # _____

Property Owner Name: _____ Phone: _____

Owner / Applicant: _____ Phone: _____

Address: _____ City: _____

Postal Code: _____ *Email: _____ (or Contractor Email below)

NOTE: Homeowner Applications shall be reviewed by an Inspector prior to issuance.

Electrical Contractor: _____ Phone: _____

Address: _____ City: _____ Fax: _____

Postal Code: _____ *Email: _____

*** Mandatory Field**

Master Electrician: _____ Master Number: _____

NOTE: Applications for Electrical Permit without a Master Electrician and Master Number shall be reviewed by the Inspector prior to issuance

GENERAL INFORMATION

- ☐ New ☐ Renovations/ Additions ☐ Annual Inspection / Investigation ☐ Temp. Service ☐ Service Change
- ☐ Residential ☐ Commercial ☐ Industrial ☐ Institutional ☐ Basement Suite
- For Residential Only:** ☐ Basement Development ☐ Addition ☐ Garage ☐ Alteration ☐ Other
- Installation Cost (Commercial) \$ _____ Square Footage (Residential) _____

SERVICE CONNECTION PERMIT DESCRIPTION

New Electrical Service Connection? ☐ YES ☐ NO Rating: Voltage _____ Amperes _____ Phase _____

Supply Service required will be: ☐ Overhead ☐ Underground ☐ None

Solar, Wind and Alternative Energy System Wiring and Connection to Existing Electrical Service ☐

Brief Description of Installation: _____

WIRING PERMIT DESCRIPTION

Method of Wiring: ☐ NMD Cable ☐ Conduit ☐ Armoured Cable

Brief Description of Installation: _____

FEES DUE: (FOR OFFICE USE ONLY)

Service Fees \$ _____

Wiring Fees \$ _____

Safety Code Fees \$ _____

TOTAL FEES \$ _____

TOTAL # OF ELECTRICAL PERMITS: _____

METHOD OF PAYMENT:

- ☐ Credit Card on File
- ☐ Please contact me on the Fee Total prior to charging my credit card
- ☐ Cheque Enclosed
- ☐ Call for Payment
- ☐ Other

Inspection Requests

Contact Building Inspection Services to request inspections prior to covering the work. Phone: 780-418-6601

Fax: 780-458-1974

Collection and use of personal information

Collection and Use of Personal Information is collected under the authority of s. 4(c) of the 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.

PERMITS MUST BE OBTAINED PRIOR TO COMMENCING WORK

RESPONSIBILITY OF THE CONTRACTOR

Neither the granting of a permit, nor the approval of plans and specifications, nor inspections by a Safety Codes Officer shall in any way relieve the owner from full responsibility for carrying out the work in strict accordance with the Safety Codes Act.



CREDIT CARD AUTHORIZATION

To: Planning & Engineering
The City of St. Albert
5 St. Anne Street
St. Albert, AB T8N 3Z9

Phone: 780-459-1654
Email: development@stalbert.ca

Effective January 1, 2026, the Planning and Engineering Department will begin applying a non-refundable credit card processing fee to all payments made by credit card. To avoid this fee, payment may be made by debit card, cash, or cheque.

Authorization: By signing this form, I authorize the City of St. Albert, Planning and Engineering Department, to charge the provided credit card for the cost of application/permit fees and the credit card processing fee.

Payment Method: ☐ VISA ☐ M/C ☐ OTHER _____

Name of Cardholder (as shown on card): _____

Card Number: _____

Expiration Date (mm/yy): _____

Security Number (CVV): _____

Signature of Cardholder: _____ Date: _____

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