

Box 600 Crowsnest Pass, Alberta TOK 0E0 Phone: 403-562-8833

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		*Office Use Only*			
	Permit #				
Department:					
ı		Building		Plumbing	
		Electrical		PSDS	
		Gas			
	DATE RCVD				

## **Permit Extension Request Form**

I/We hereby request for a Permit Extension under the provisions of the Safety Codes Permits Bylaw and the Fees, Rates and Charges Bylaw.

Permit #:	Project Address:
Date Issued:	Original Permit Expiry:
Permit Extension Fee Paid:	
Reason for Extension:	
New Timeframe for Conducting	Inspections:
Applicant/Contractor	Owner of Land
Contractor: YES NO NO	Same as applicant □
Name:	Name:
City:	City:
Postal Box & Code:	Postal Box & Code:
Phone:	Phone:
Alt. Phone:	Alt. Phone:
Email:	Email:
Master/Journeyman #:	
Signature:	Signature:
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Extension Request Approved: Extension Request Denied:

If Approved, Revised Permit Expiry Date:

Safety Codes Officer Name/Designation Number

Safety Codes Officer Signature

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 as per section 33 (c). 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 FOIP Coordinator Municipality of the Crowsnest Pass at 403-562-8833.