



Project Information Form for Air Conditioning Units

Project Location in the City of Chestermere:

Municipal Address: _____ Lot _____ Block _____ Plan _____

Submission Checklist

Electrical Permit Application Form

Proposed Location of AC Unit on the lot: Side Yard Rear Yard

General Regulations:

I, _____, the owner/owner's representative understands and confirms that the proposed Air Conditioning Unit will only project a maximum of 1.0 meter into the minimum setback area for the land use zone of the property.

I confirm that the Air Conditioning Unit will not be built on top of an easement.

I confirm that I understand the City of Chestermere Land Use Bylaw General Regulations for Air Conditioning Units and I accept sole responsibility for ensuring compliance with the City of Chestermere Land Use Bylaw, the current National Building Code—Alberta Edition 2023 & the Safety Codes Act. Any contravention of applicable legislation, specified herein or otherwise, may result in penalties or other enforcement.

I/We hereby declare that the above information is, to the best of my/our knowledge, factual and correct.

Signature: _____

Date: _____



CHESTERMERE

Credit Card Authorization and Consent Form

I, _____ hereby authorize The City of Chestermere to charge my credit card for the fees associated with the application for:

Project Description: _____

at

Address: _____

<input type="checkbox"/> Development Review/Permit	<input type="checkbox"/> PSDS Permit
<input type="checkbox"/> Partial and/or full Building Permit	<input type="checkbox"/> HVAC Permit
<input type="checkbox"/> Electrical Permit	<input type="checkbox"/> Advertising Fee/Admin Fee
<input type="checkbox"/> Gas Permit	<input type="checkbox"/> WS Connection Fee
<input type="checkbox"/> Plumbing Permit	<input type="checkbox"/> Additional Inspection Fees:
<input type="checkbox"/> Other Fee: _____	
<input type="checkbox"/> For Office Use only, See attached breakdown (page 2)	

Type of Card:

Visa Master Card

Credit Card Number: _____

CVV: _____

Expiration Date: _____

Name of Cardholder: _____

By signing this, I acknowledge that the amount/charges associated with the permit release for the project noted above will be sent via a separate email from the City of Chestermere. I assume full responsibility for said charges and agree to honor and abide by the terms of payment.

I understand that the City of Chestermere will only process credit card payments amounting to less than \$2,500 per transaction. Fees amounting to more than \$2,500.00 will be settled by other methods of payment.

Cardholder Signature:

The personal information on this Credit Card Authorization form is collected for the purpose of processing payments. This information is being collected under the authority of Section 640(2) of the Municipal Government Act and Section 34 of the Access to Information Act (ATIA) and Protection of Privacy Act (POPA).