



CHESTERMERE

Electrical Permit Application

DATE RECEIVED STAMP

(office use only)

Applicant Type: Homeowner Contractor

The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act. A permit may expire if the undertaking to which it applies: (a) is not commenced within 90 days of issue of the permit, (b) is suspended or abandoned for a period of 120 days. An extension can be considered when applied for in writing prior to permit expiry date.

The permit applicant acknowledges that refunds and permit extension requests will be subject to approval.

Owner Name: _____ Mailing Address: _____

City: _____ Province: _____ Postal Code: _____ Phone: _____

Cell: _____ Email: _____

Owner's Signature / Declaration (for residential dwellings only) **"I hereby declare I am the owner of the premises in which the work will be conducted and reside or will reside on the property. I am doing the work myself and assume responsibility for compliance with the applicable Act and Regulation."**

Contractor Company Name: _____ Mailing Address: _____

City: _____ Province: _____ Postal Code: _____ Phone: _____

Cell: _____ Email: _____

Master Electrician Name

Master Electrician Number

Master Electrician Signature

Project Location in the City of Chestermere:

Municipal Address: _____ Lot _____ Block _____ Plan _____

Description of Work: _____ **Total Developed Area:** _____ sq ft.Is the basement included on your scope of work? Yes; indicate rooms: _____ No

Value of Labor and Materials (electrical work only): \$ _____

BUILDING TYPE:

- Single/Semi Detached Dwelling
- Multi-Family Dwelling
- Commercial
- Institutional
- Industrial
- Other: _____

TYPE OF WORK:

- New Work ** AC Unit _____
- Renovation (qty, make & model)
- Connection ** Solar Panel
- Temporary Service
- Other: _____
- Annual Permit

** Project info sheet required- submit w/ application

SERVICE INFORMATION:**Supply Service Required?** Yes NoType of Supply Service: Overhead Underground

Service Information: Amps: _____

Volts: _____

Phase: _____

Payment Type: Cash Cheque Credit Card Debit Invoice

Permit Fee: \$ _____ + *SCC Levy: \$ _____ = Total Permit Fee: \$ _____

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

** Payment is required before the permit can be issued. Complete and submit the credit card authorization and consent form if you authorize the City of Chestermere to charge the credit card for the fees associated to this permit, otherwise, you will receive a call or an email from the City requesting for payment.

All Safety Codes Inspection Requests must be sent to inspections@chestermere.ca. To find out the updated schedule of inspection, please go to our website at www.chestermere.ca.

ATIA/POPA Notification: The personal information you provide on this form 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) and is protected by the privacy provision of these acts. This information will be used to determine eligibility for a development/building permit and for enforcement of applicable laws and may be circulated to persons or authorities as necessary for the review process. If you have questions about the collection of this information, please contact the ATIA/POPA Coordinator at atia@chestermere.ca or in person at 105 Marina Road, Chestermere, Alberta T1X 1V7 (403) 207-7050.



Project Information Form for Solar Panel/Solar Collector

Project Location in the City of Chestermere:

Municipal Address: _____ Lot _____ Block _____ Plan _____

Submission Checklist

- Electrical Permit Application Form
- Proposed Layout of Solar Panels
- Details of Structural Changes
- Provide details of system components
 - Collector(s)
 - Controller(s)
 - Inverter(s)
- Provide Engineered Racking details (include ballast detail and installed system weight)
- Schematics or Site-specific Line Diagram
- Total kW capacity _____
- Provide Manufacturer's Specs/Manual

Location of Solar Panel Roof Wall

Freestanding (Solar Array) – this will be reviewed as an accessory building. A DP and BP may be required.

General Regulations: (read and affix initials below as applicable to the proposal)

A Solar Collector mounted on a roof with a pitch of less than 4:12 may project:
a) a maximum of 0.5 m from the surface of a roof, when the solar collector is located 5.0 m or less from a side lot line, measured directly due south from any point along the side lot line; and
b) in all other cases, maximum of 1.3 m from the surface of a roof.

A Solar Collector mounted on a roof with a pitch of 4:12 or greater may project a maximum of 1.3 m from the surface of a roof.

A Solar Collector mounted on a roof must not extend beyond the outermost edge of the roof.

A Solar Collector that is mounted on a wall:
a) must be located at a minimum of 2.4 m above grade; and
b) may project a maximum of:
i) 1.5m from the surface of that wall, when the wall is facing a rear lot line; or
ii) in all other cases, 0.6 m from the surface of that wall.

A Solar Collector mounted on a structure must meet yard setback and district height regulations.

By initialing above, I confirm that I understand the City of Chestermere Land Use Bylaw General Regulations for Solar Panel and I accept sole responsibility for ensuring compliance with the City of Chestermere Land Use Bylaw & 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.



CHESTERMERE

PERMIT AUTHORIZATION FORM

COMMUNITY GROWTH & INFRASTRUCTURE

105 Marina Road, Chestermere, Alberta T1X 1V7

Phone: 207-7075 Fax: 207-2817

www.chestermere.ca

PERMIT AUTHORIZATION FORM

OWNER INFORMATION

I (We), _____ (name(s) of Registered Landowner(s)) being the registered landowners of: Municipal Address: _____
Postal code _____

Legal Description: _____

Do hereby authorize:

APPLICANT INFORMATION

Company: _____

Contact Name: _____

Address: _____ Postal Code _____

Phone: _____ Email: _____

to make application for the necessary building /development permits required to complete the following project:

ALL REPORTS WILL BE PROVIDED TO OWNER AND APPLICANT.

(Print name of Registered Land Owner)

(Print name of Registered Land Owner)

(Signature of Registered Land Owner)

(Signature of Registered Land Owner)

Date

Date