



CITY OF LLOYDMINSTER

4420 - 50 Avenue, Lloydminster, AB T9V 0W2

ph (780) 871-8334 fx (780) 871-8347

BUILDING PERMIT APPLICATION Permit # _____ - _____

APPLICANT INFORMATION

OWNER _____ ADDRESS _____ PH _____

ARCH/ENG _____ ADDRESS _____ PH _____

CONTRACTOR _____ ADDRESS _____ PH _____

SITE INFORMATION

ADDRESS _____ LOT _____ BLOCK _____ PLAN _____ ZONE _____

PROPOSED CONSTRUCTION _____ NEW _____ ADDITION _____ ALTERATION _____
(Indicate if basement development is included.)

BUILDING INFORMATION

BUILDING - WIDTH _____ LENGTH _____ HEIGHT _____ STOREYS _____ # OF FAMILIES _____

BUILDING AREA _____ M² GROSS FLOOR AREA _____ M² FOUNDATION = CONC _____ PWF _____

HEATING SYSTEM = NGFA _____ RADIANT _____ NG FIREPLACE _____ WOOD STOVE _____ WOOD FIREPLACE _____ OTHER _____

APPLICATION TERMS AND CONDITIONS

I hereby agree that I have read this application and state that the above is correct and agree to comply with all City Bylaws and/or Provincial Laws which are applicable to this application. It is expressly understood that the issuing of a building permit and review of plans does not relieve the applicant or owner from complying with all Bylaws, though not called for in the specifications or shown on the plans or information submitted and/or this application.

NOTE:

**AN OCCUPANCY PERMIT IS REQUIRED TO OCCUPY A BUILDING.
THIS APPLICATION FOR A PERMIT MUST BE APPROVED BEFORE PROCEEDING WITH ANY WORK.
ONCE THE PERMIT IS APPROVED, IT IS VALID FOR A TWELVE-MONTH PERIOD FROM THE DATE OF
ISSUE. RENEWAL IS REQUIRED AFTER THAT DATE.**

Owner/Authorized Agent _____ (Print) _____ Date _____

APPROVAL - TERMS AND CONDITIONS

APPROVED _____ **REFUSED** _____

Approval is subject to compliance with the conditions under which the Building Permit has been issued. Failure to comply with all the conditions of approval and/or construction regulations of the City of Lloydminster, or any deviation from information or plans submitted will result in a Stop Work Order being issued and possible prosecution.

Required Inspections: Footing _____ Backfill _____ Framing _____ Insulation _____ Final _____ Other _____

24 HOUR NOTICE IS REQUIRED FOR INSPECTIONS

Conditions of Approval (See Attached Plan Review if Applicable): _____

Building/Development Officer _____ Date _____

PERMIT FEES: CURRENT RATE PER \$1,000 OF VALUATION (TOTAL CONTRACT VALUE)

VALUATION _____	OFFSITE S/C _____	TOTAL _____
PERMIT FEE _____	DAMAGE DEPOSIT _____	GENERAL RECEIPT _____