

## **REQUEST FOR A VARIANCE**

PL 1133 (R2015-12)

		Permit Number	Date (YYYY-MM-DD)
	T		
Name (Building/Establishment)	Address		
Requested By (Electrical Contractor/Firm)			
,			
IN ACCORDANCE WITH PART 3-34- (1) (2) (3) OF THE ALBERTA SAFETY CODES ACT, A VARIANCE IS HEREBY REQUESTED AT THE ABOVE LOCATION.			
1 . Rule to be Varied			
2 . Reason for Variance			
3 . Proposed Method of Variance			
ACCEPTANCE OF OWNER(S) REPRESENTATIVE(S)			
Name (Please Print)		Signature	
Name (Diago Print)		Cimantum	
Name (Please Print)		Signature	
Name (Please Print)		Signature	
Name (Please Print)		Signature	
REVIEWED BY			
Master Electrician/Installer Name (Please Print)		Signature	
Safety Codes Officer Name (Please Print)		Signature	
Salety Codes Officer Name (Flease Fillit)		Signature	
Chief Safety Codes Officer Name (Please Print)		Signature	

The personal information on this form is being collected under the authority of The Calgary Building Permit Bylaw 64M94 (Section 5) and amendments thereto. It will be used for the permit review and inspection processes and may be communicated to relevant City Business Units, utility providers, and Alberta Health Services. It may also be used to conduct ongoing evaluations of services received from Planning, Development & Assessment. The name of the applicant and the nature of the permit will be available to the public. Please send inquiries by mail to the FOIP Program Administrator, Planning, Development & Assessment, PO Box 2100, Station M, Calgary, AB T2P 2M5 or contact us by phone at 311.