



# Service Disconnection Request For the demolition or moving of a building

Address of Building to be Removed		Building to be: <input type="checkbox"/> Moved <input type="checkbox"/> Demolished	
Legal Description	Year of Construction	Garage to be demolished? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Multi-family		Section 34 of the Occupational Health and Safety Code states that "If a building is to be demolished, the employer must ensure that materials with the potential to release asbestos fibres are removed first". Alberta Workplace Health and Safety (WHS) will be sent a copy of this form. Call WHS at 1-866-415-8690 for more information.	
# of Dwelling Units	# of Stories		
<b>Property Owner</b>			
Name		The Alberta Building Code 2014, Division A, 1.4.1.2 states: " <b>Owner</b> means a person who a. controls the property under consideration, b. holds them self out as the person having the powers and authority of ownership or who for the time being exercises the powers and authority of ownership, c. is registered under provincial legislation as the owner of a freehold estate in possession of land, or d. has purchased or otherwise acquired land, whether they have purchased or otherwise acquired the land directly from a previous owner or from another purchaser, and have not yet registered their ownership."	
Address			
Postal Code	Phone #		
Email			
<b>Applicant</b>		<b>Demolition Contractor</b>	
<input type="checkbox"/> Owner <input type="checkbox"/> Representing Owner		<b>Contractor Business Name</b>	
Applicant's Name		<b>Business Address</b>	
Applicant's Business Name (where applicable)		Business Address	
Applicant's Address			
Postal Code	Phone #	Postal Code	Phone #
Email		Email	
<p>It is the responsibility of the applicant to apply for and arrange for all utility service disconnections and related costs. The applicant shall take this form to each of the following authorities and obtain an authorized signature in the appropriate space provided. This form is to be submitted to Calgary Building Services when completed, for processing and issuance of a permit.</p> <p><b>All required approvals and authorized signatures must be obtained - Incomplete forms will NOT be accepted. The use of streets or public property and the control of traffic during demolition/moving is controlled by the Traffic Operations Division and approval must be obtained from their office prior to the commencement of work.</b></p>			
<b>Required Approvals</b>		<b>Authorized Signatures</b>	
<b>THE CITY OF CALGARY</b> <b>Water Services</b> Phone: 311 for Water-Off-On Appointment		Reference No.	Date    YYYY    MM    DD
		Signature	
<b>ENMAX</b> <b>Step 1</b> - Contact your Retailer to request a permanent service disconnect. <b>Step 2</b> - Scan and email completed form to <a href="mailto:SOC2@enmax.com">SOC2@enmax.com</a> for authorized sign off. For additional information, contact Enmax at 403-514-2807.		Reference No.	Date    YYYY    MM    DD
		Signature	
<b>ATCO GAS</b> <b>Step 1: Apply</b> - All ATCO service line removal requests are submitted through our online Quick Connect portal. Once your request is processed, a confirmation email will be sent with additional details for scheduling. Visit <a href="https://quikconnect.atco.com">https://quikconnect.atco.com</a> to apply. <b>Step 2: Confirmation Signature</b> - An ATCO representative will provide a signature once the service line is disconnected. <b>Questions:</b> Call Service Applications - 403-254-6222		Reference No.	Date    YYYY    MM    DD
		Signature	
<b>Applicant's Declaration:</b> All provisions of restrictive caveats, covenants, utility rights-of-way, overhead wires, laws and bylaws governing this type of work on this property will be complied with whether specified herein or not. I understand that Building Permit Bylaw Number 39M2018 states that, an application for a permit may be refused if within 90 days from the date of receipt, adequate information and documentation is not supplied to the Safety Codes Officer, and there shall be no refund of any fees that have been paid.  In relation to the submission of this application, I confirm that I am i. An owner of the parcel, an authorized agent of the owner of the parcel, or other person having legal or equitable interest in the parcel, and ii. If the parcel has a condominium board, I have consent from the condominium board to submit this application.  In addition, I certify that all information submitted with this application, including information shown on plans and documents, to be true and correct. Incomplete or inactive applications may be cancelled or refused at the discretion of the proper authority in accordance with their respective bylaw.  <input type="checkbox"/> I agree to receive correspondence via electronic message related to this application			