



CROSSING/PROXIMITY PERMIT APPLICATION

** In accordance with the requirements set forth in the Gas Distribution Act (Alberta) and the Water, Gas and Electric Companies Act (Alberta)										
DATE:		REQUESTOR REFERENCE #								
CONTACT INFORMATION										
REQUESTOR:		CONTACT PERSON:								
PHONE:		EMAIL:								
ADDRESS:										
REQUESTING FOR: (COMPANY NAME):		CONTACT PERSON:								
PHONE:		EMAIL:								
ADDRESS:										
CROSSING/PROXIMITY LOCATION										
LEGAL LAND:	Quarter:		Section:		Township:		Range:		West of:	
LEGAL:	Lot:		Block:		Plan:					
MUNICIPAL ADDRESS:										
SUBDIVISION NAME:										
CONSTRUCTION INFORMATION										
ESTIMATED START DATE:										
CROSSING TYPE:	☐ Ditch	☐ Fence	☐ Drainage System	☐ Private Road/Driveway						
	☐ Gravel Road	☐ Sidewalk	☐ Private Water/Waste Water	☐ Field						
WIDTH OF CROSSING:										
DESCRIPTION OF WORK:										
VEHICLE CROSSINGS: WHEELED VEHICLE										
Make	Model				Total Vehicle Weight (lbs)			Number of Vehicles		
VEHICLE CROSSINGS: TRACKED VEHICLE										
Make	Model				Total Vehicle Weight (lbs)			Number of Vehicles		
ADDITIONAL INFORMATION										
Comments:										
PLEASE ATTACH A MAP INDICATING PROJECT AND CROSSING AREA										
OFFICE USE ONLY										
APPLICATION REC'D:	Rec'd by:					Date:				
GM APPROVAL:	Signature:					Date:				
COMMENTS:										
Lat:					Long:					