

ELECTRICAL PERMIT APPLICATION

Permit Number ELE _____ Permit Fee \$ _____ Date _____	
A. ADDRESS _____ NUMBER N-S-E-W STREET NAME APT # IF THIS BUILDING HAS MULTIPLE ADDRESSES: LOWEST NUMBER _____ HIGHEST NUMBER _____	F. UPGRADE SERVICE: FROM _____ TO _____ AMPS G. VALUE OF ELECTRICAL WORK: \$ _____ H. CONSTRUCTION DESIGN RELEASE: _____ I. STRUCTURAL PERMIT NUMBER: _____ J. STRUCTURAL PERMIT FEE: \$ _____ K. NUMBER OF METERS: _____ L. NUMBER OF MOBILE ASSEMBLIES: _____ M. SQUARE FOOTAGE: _____ N. ACCESSORY STRUCTURE: ____ FINISHED ____ UNFINISHED O. NUMBER OF UNITS: _____
B. OWNER OF THE PROPERTY: NAME _____ ADDRESS _____ NUMBER N-S-E-W STREET NAME APT # CITY _____ STATE _____ ZIP CODE _____ TELEPHONE NUMBER (_____) _____ EMAIL ADDRESS _____	P. CONTRACTOR RESPONSIBLE FOR ELECTRICAL PERMIT: If the applicant is obtaining the permit for a contractor which is licensed with the Department of Business and Neighborhood Services, please complete the following information: _____ Business Name Business License Number: _____ I AFFIRM, UNDER PENALTIES OF PERJURY, THAT THE FOREGOING REPRESENTATIONS ARE TRUE. _____ Applicant Name _____ Date _____ Applicant Signature Applicant License Number: _____ Applicant Email Address: _____ Telephone Number: (_____) _____ Fax Number: (_____) _____
C. USE OF STRUCTURE: (CHECK ONE) ____ 1) ONE FAMILY ____ 2) TWO FAMILY ____ 3) NON-RESIDENTIAL ____ 4) MULTI-FAMILY/CONDOS (3 OR MORE UNITS)	
D. PERMIT TYPE (CHECK ONE) ____ 1) ADDITION ____ 2) ALTERATION/REMODEL ____ 3) CONNECTION TO MOBILE HOME ____ 4) GENERAL SERVICE ____ 5) MOBILE HOME PARK ____ 6) NEW INSTALLATION ____ 7) TEMPORARY SERVICE ____ 8) UNDERSLAB ONLY	
E. DETAILED SCOPE OF WORK: _____ _____ _____ _____ _____ _____	