

Electrical Permit # _____

Sec. _____ Blk. _____ Lot _____

APPLICATION FOR NEW OR EXTENDED ELECTRIC SERVICE

(PLEASE PRINT CLEARLY AND FILL IN ALL BLANKS)

NAME AND MAILING ADDRESS

GENERAL CONTRACTORS' INFORMATION

(PHONE) _____ (CELL) _____

(PHONE) _____ (CELL) _____

WORKER'S COMPENSATION POLICY # _____

(Copy of Policy or an approved Affidavit must be on file prior to issuance of the Permit)

PROPOSED WORK:

New Service

Alteration to an existing service

DESCRIPTION OF PROJECT:

Single Phase

Three Phase

Size of New Service in Amps: _____

Voltage: {120/240} {120/208} {277/480} {4800/320Y}

Single Family Multi-Family Commercial

Will any additional electric meters be required? YES NO

List any single loads in excess of 2,000 watts: _____

Estimated Cost of Project: \$ _____

Describe the type of work to be performed: _____

Name of Electrical Inspector: _____

SIGNATURES: The above information is accurate to the best of my knowledge:

Owner of Property: _____
(Signature) DATE

Applicant: _____
(Signature) DATE

BUILDING INSPECTOR DATE

