



ELECTRICAL PERMIT

DATE _____

PERMIT NO. _____

TOTAL PERMIT FEE \$ _____

PERMIT TYPE:

NEW CONSTRUCTION REMODEL OR REPAIR **ESTIMATED JOB COST \$** _____

PROPERTY DETAILS

NAME _____ PHONE # _____

STREET ADDRESS _____ CITY _____

OWNER OF STRUCTURE

NAME _____ PHONE # _____

STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____

MASTER ELECTRICIAN

NAME _____ MASTER LICENSE # _____

COMPANY NAME _____ CONTRACTOR LICENSE # _____

STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE # _____ EMAIL _____

PERSON DOING THE WORK (other than Master Electrician)

NAME _____ LICENSE # _____

STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE # _____ EMAIL _____

SIGNATURE OF APPLICANT _____

_____ SIGNATURE OF INSPECTOR	_____ DATE	<input type="checkbox"/> PASSED
_____ WO #		<input type="checkbox"/> FAILED