



ELECTRIC PERMIT

Permit No.: _____

Date: _____

Office Use Only

Applicant's Name: _____ Cell: _____
 Applicant's Company: _____ Phone: _____
 Applicant's Address: _____
 Property Owner's Name: _____ Phone: _____
 Property Owner's Address: _____
 Job Site Address: _____ Parcel No: _____
 Contract Value of Work: \$ _____ Sq. Footage _____ Residential Commercial
 Electric approved w/Building Permit Yes No BUILDING PERMIT No. _____
 Replacement Upgrade Remodel Addition Alteration New Construction Bldg. Shell Tenant Finish

| LOCATION | DEVICES | | | | | | | | | | | | | | | | Total | |
|---|----------------|----------------|---------|---------|-------------|-------------|-------------|-----------|------------|-------------|---------|------------|-------|--------|------|----------------|-----------------------------|---------------|
| | Basement/Crawl | Entrance/Porch | Utility | Kitchen | Dining Room | Living Room | Family Room | Study/Den | Bedroom(s) | Bathroom(s) | Closets | Hallway(s) | Attic | Garage | Yard | Building Shell | | Tenant Finish |
| Fixtures | | | | | | | | | | | | | | | | | | |
| Receptacles | | | | | | | | | | | | | | | | | | |
| Switches - 2 way | | | | | | | | | | | | | | | | | | |
| Switches - 3 way | | | | | | | | | | | | | | | | | | |
| Smoke Detector(s) | | | | | | | | | | | | | | | | | | |
| Ceiling Fan(s) | | | | | | | | | | | | | | | | | | |
| GFI(s) | | | | | | | | | | | | | | | | | | |
| Fixtures, Receptacles, Ceiling Fans, Smoke Detectors, Misc. | | | | | | | | | | | | | | | | | GROUP A DEVICE TOTAL | |

| | | | | | | | | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----------------------------|--|
| Hot Water Heater | | | | | | | | | | | | | | | | | | |
| Electric Range | | | | | | | | | | | | | | | | | | |
| Clothes Dryer | | | | | | | | | | | | | | | | | | |
| Air Conditioner Unit(s) | | | | | | | | | | | | | | | | | | |
| Heat Pump | | | | | | | | | | | | | | | | | | |
| Furnace(s) | | | | | | | | | | | | | | | | | | |
| Electric Heat Units | | | | | | | | | | | | | | | | | | |
| Disconnect(s) | | | | | | | | | | | | | | | | | | |
| Backup Switch | | | | | | | | | | | | | | | | | | |
| Subpanel | | | | | | | | | | | | | | | | | | |
| Appliances, Motors, Furnace, AC, Heat Pump, Water Heater, Misc. | | | | | | | | | | | | | | | | | GROUP B DEVICE TOTAL | |

Attach any product specifications or written description necessary to define materials and equipment.

Commercial submittals must be stamped by architect or engineer (except for replacement in kind).

| | QUANTITY | UNIT COST | TOTAL COST |
|---|----------|------------------|------------------------------|
| GROUP A TOTAL | _____ X | \$1.77 | _____ |
| GROUP B TOTAL | _____ X | \$5.30 | _____ |
| PERMANENT SERVICE(s) _____ Total Amps | _____ X | \$0.30 (PER AMP) | _____ |
| BACK UP GENERATOR _____ Total Amps | _____ X | \$0.30 (PER AMP) | _____ |
| TEMPORARY SERVICE _____ Total Amps | _____ X | \$1.00 (PER AMP) | _____ |
| NEW METER BOX(S) _____ | | | |
| TRANSFORMERS (5 KVA & OVER) _____ | _____ X | \$13.00 | _____ |
| BUSWAY (FEET) _____ | _____ X | \$0.53 | _____ |
| MINIMUM PERMIT FEE \$100.00 plus applicable OBBS | | | Subtotal _____ |
| OBBS <input type="checkbox"/> Residential add 1 % <input type="checkbox"/> Commercial add 3 % | | | OBBS FEE _____ |
| Re-inspection and partial inspection fees are \$75.00 each | | | |
| | | | Permit Total \$ _____ |

Applicant's Signature _____

Building Dept. Signature _____