PERMIT APPLICATION

BUILDING PERMIT _____ **ELECTRICAL PERMIT** _____

Municipality _____ County _____ Tax Parcel _____

Construction Site Location _____ Date Received _____

Owner _____ Tenant _____

Address _____ Address _____

State _____ Zip _____ Phone# _____ State _____ Zip _____ Phone# _____

Front Yard _____ Ft. (Front of building to property line) | Describe proposed work in detail _____

Rear Yard _____ Ft. (Rear of building to property line) | _____

Side Yard _____ Ft. Side Yard _____ FT. | _____

State Classification: New Commercial _____ Other Commercial _____ New Residential _____ Other Residential _____

BUILDING PERMIT

Contractor _____
(if owner, put same name above)

Address _____

City _____ State _____ Zip _____

Phone _____ Cell _____

Fed Employee No. _____

(Certificate of Insurance for Workers Compensation needed or signed exemption form)

Estimate of total costs for all work _____

Total square feet: _____ Use Group _____ Type Construction _____

No. of Stories: _____ Height of Structure _____

Description of work: _____

_____

Type of work:

Alterations/Additions of: _____ Square Ft. _____

( ) Roofing - Total square feet _____

( ) Fencing, supply height if it exceeds 6 foot _____

( ) Sign - Total Square feet _____

( ) Pool - Total Square feet _____

( ) Decks - Total Square feet _____

( ) Demolition - Total Square feet _____

( ) Accessibility _____

Other: _____

_____

I hereby acknowledge that I have read this application and state the above is correct to comply with all Municipal ordinances and state laws regarding construction.

Signature: _____

Owner ( ) Contractor ( ) Owner Representative ( )

ELECTRICAL PERMIT

Contractor _____
(if owner, put same name above)

Address _____

City _____ State _____ Zip _____

Phone _____ Cell _____

Fed Employee No. _____

(Certificate of Insurance for Workers Compensation needed or signed exemption form)

Estimate of total costs for all work _____

Technical Site

Data No.	Size	Items
_____		Lighting Fixtures
_____		Receptacles
_____		Switches
_____		Detectors
_____	HP _____	Motor-Fractional
_____		Communication Devices
_____		Alarm Devices/Systems
_____		Emergency & Exit Lights
_____		Pool Bonding
_____	_____	Service
_____	_____	Sub-Panels
_____	_____	Feeders
_____		Baseboard Heater
_____		Dryer Receptacle
_____ Range	_____ Dishwasher	_____ Garbage Disposal
_____ Heater	_____ Central A/C Units	
_____		Signs
_____		Survey Fee

Others: _____

_____

Signature: _____

Owner ( ) Contractor ( ) Owner Representative ( )

BUILDING CODE OFFICIAL USE ONLY

Plans Approved _____ Plans Approved with Comments _____

UCC Building Fee: _____

Plan Review Fee: _____

Admin. Fee: _____

State Fee: _____

Total Cost: _____

Code Official: _____ State Cert.# _____

Date Issued: _____

ELECTRICAL CODE OFFICIAL USE ONLY

Plans Approved _____ Plans Approved with Comments _____

UCC Electrical Fee: _____

Plan Review Fee: _____

Admin. Fee: _____

State Fee: _____

Total Cost: _____

Code Official: _____ State Cert.# _____

Date Issued: _____