



ELECTRICAL SUBCODE TECHNICAL SECTION



Date Received
Control #
Date Issued
Permit #

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block _____ Lot _____ Qualification Code _____
Work Site Location _____

Owner in Fee: _____
Tel. (_____) _____ e-mail _____
Address _____

_____ street _____ municipality _____ zip code _____

Contractor: _____ Tel. (_____) _____
Address _____ e-mail _____

Contractor License No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. _____ FAX: (_____) _____

B. ELECTRICAL CHARACTERISTICS

Use Group: Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary _____ [] Other _____
Building Occupied as _____ Utility Co. DR # _____
Est. Cost of Elec. Work \$ _____

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)		
PLAN REVIEW		Type:	Failure	Failure	Approval	Initial
[] No Plans Required		Rough	_____	_____	_____	_____
[] Electric Plans Reviewed		Barrier-Free	_____	_____	_____	_____
Date: _____ Reviewed by: _____		Trench	_____	_____	_____	_____
Joint Plan Review Required:		Generator	_____	_____	_____	_____
[] Bldg. [] Plumb. [] Fire [] Elev.		Solar	_____	_____	_____	_____
Date: _____ Reviewed by: _____		TCO	_____	_____	_____	_____
SUBCODE APPROVAL for PERMIT		Other	_____	_____	_____	_____
Date: _____		Service	_____	_____	_____	_____
Released by: _____		Final	_____	_____	_____	_____
SUBCODE APPROVAL for CERTIFICATE		Bond-Grid	_____	_____	_____	_____
[] CO [] CCO [] CA		Cut-in-Card Issue Date (P) _____ (T) _____	_____	_____	_____	_____
Date: _____		Annual Pool Inspection	_____	_____	_____	_____
Released by: _____		Grounding & Bonding Certification Date _____	_____	_____	_____	_____

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Applicant/Contractor

Sign and Seal here: _____

Print name here: _____

D. TECHNICAL SITE DATA [] Licensed Contractor [] Exempt Applicant

DESCRIPTION OF ALL ELECTRICAL WORK:

QTY	SIZE	ITEMS
_____	_____	Devices
_____	_____	Detectors [] Smoke OR [] CO
_____	_____	Light Poles/ Bollards. Height size _____
_____	_____	Emergency & Exit Lights
_____	_____	Alarm Devices/ F.A.C. Panel
_____	_____	SEE ATTACHED LIST
_____	_____	Pool Permit/ with UV Lights
_____	_____	Storable Pool/Spa/ Hot Tub
_____	_____	EV Charger KW
_____	_____	PV Systems KW
_____	_____	Energy Storage KW
_____	_____	KW [] Central AC Unit OR [] Mini Split
_____	_____	HP/KW [] Space Heater [] Air Handler [] Furnace
_____	_____	KW Baseboard
_____	_____	Load Shed KW
_____	_____	KW Transformer/ Generator
_____	_____	AMP Service
_____	_____	Amp Subpanels
_____	_____	AMP Disconnect/ ATS
_____	_____	KW. Elec. Sign/Outline Light
_____	_____	OTHER

FEE (Office Use Only)

\$ _____

Administrative Surcharge \$ _____
Minimum Fee \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ _____