



COMMERCIAL/MULTI-FAMILY ELECTRICAL PERMIT APPLICATION

Job Address:							
Property Owner Name:				Property Owner Phone No:			
Electrical Contractor Information:							
Company Name:							
Company Address:		Street					
Company Address (cont.):		City		State		Zip	
Company Phone No:				Alt./Contact Phone No:			
Description of Work	Fee	Qty.	Amnt (\$)	Description of Work	Fee	Qty.	Amnt. (\$)
Meter Loop & Service (includes 4 outlets)	\$60.00			Electric Dryer	\$10.00		
Outlets Over 4	\$2.00			Range Outlet	\$10.00		
Fixtures	\$1.50			Range Table Top	\$10.00		
Motors: Less than 1/2 HP	\$5.00			Range Oven	\$10.00		
1/2 to < 10 HP	\$7.00			Garbage Disposal	\$10.00		
10 to < 50 HP	\$15.00			Dishwasher	\$10.00		
100 to < 150 HP	\$30.00			Microwave	\$5.00		
150 HP & Over	\$50.00			KW: 0-5 (per KW)	\$4.00		
Temporary Cut-In	\$60.00			Over 5 (Per addt'l KW)	\$2.00		
Temporary Sawpole	\$35.00			X-Ray Machine	\$10.00		
Reconnect	\$60.00			Motion Picture Machine	\$15.00		
Sign: Per Ballast	\$5.00			Commercial Sound Equipment	\$4.00		
Sign: Per Transformer	\$8.00			Re-Inspection Fee	\$80.00		
Electric Water Heater (>1500 watts)	\$8.00			Processing Fee* (Non-Refundable)	\$80.00		
Other (Describe Below):	\$60.00			Minimum Permit Fee	\$140.00		
				Total			

*NO PERMIT WILL BE LESS THAN THE \$140.00 MINIMUM FEE

Description of Work: _____

Special Conditions (if any): _____

NOTE: All permits become null and void if work or construction authorized is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is started.

I hereby certify that I have read and examined this application and know the same to be true and correct. I understand that all provisions of state laws and city ordinances governing this type of work will be complied with whether specified herein or not. I further understand that the issuance of a permit does not grant the authority to violate or cancel the provisions of any state or local laws regulating construction or the performance of construction

Applicant's Signature _____ **Date** _____

FOR OFFICE USE ONLY

PERMIT APPROVED FOR ISSUANCE BY:

 Building Official and/or Representative

 Date

Total Permit Cost: \$ _____