



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.		D. TE	D. TECHNICAL SITE DATA			
Block Lot Qualification Code		DE	DESCRIPTION OF WORK			
Work Site Location		_				
Owner in Fee:		_				
Tel. ()	e-mail	_				
Address		QTY.	SIZE	ITEMS	FEE (Office Use Only)	
Street	municipality zip code Tel. ()			Lighting Fixtures	1//////////////////////////////////////	
	e-mail			Receptacles		
	Exp. Date			Switches Detectors		
Home Improvement Contractor Registration No. or Exemption Reason (if applicable):				Light Poles		
				Motors—Fract. HP		
Federal Emp. ID No FAX: ()				Emergency & Exit Lights		
B. ELECTRICAL CHARACTERISTICS Use Group Present Proposed Proposed				Communications Points		
	[] Temporary [] Other			Alarm Devices/F.A.C. Panel		
	Utility Co			TOTAL NUMBERS		
Est. Cost of Elec. Work \$				Pool Permit/with UW Lights		
JOB/SUMMARY (Office Use Only)				Storable Pool/Spa/Hot Tub		
PLAN DEVIEW INSPECTIONS Dates (Month/Day)				KW Elec. Range/Receptacle		
'////////////////////////////////////	t Type: Failure Failure Approvat Initial			KW Oven/Surface Unit		
[] No Plans Required	Rough Pallure Pallure Approval miliar	/		KW Elec. Water Heater		
Joint Plan Review Required:	Barrier-Free	<u> </u>		KW Elec. Dryer/Receptacle	1 4////////////////////////////////////	
[] Building [] Plumbing		/		KW Dishwasher		
1 / Fire / Elevator	/Temp.Serv.////////////////////////////////////	<u> </u>		HP Garbage Disposal	 	
[] Elec. Plans Approved		/ —		KW Central A/C Unit	 	
Date:	/π¢Φ///////// //// // //// //	/		HP/KW Space Heater/Air Handler	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Approved by:		/		KW Baseboard Heat HP Motors 1/+ HP		
	Service Final	7		KW Transformer/Generator		
SUBCODE APPROVAL 1 1 CO 1 1 CCO 1 1 CA	Bartier-Free	/ I		AMP Service		
	////////////////// ///////////////////	/		AMP Subpanels		
	Temp: Cut-in-Card Date Issued Final Cut-in-Card Date Issued	4.1	AMP Moto	AMP Motor Control Center		
Date:	Annual Pool Inspection	<u> </u>		KW Elec. Sign/Outline Light	4//////////////////////////////////////	
Approved by:	Date of Grounding and Bonding	/ —			\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	Certification ————————————————————————————————————				<u>l</u> '////////////////////////////////////	
C. CERTIFICATION IN LIEU OF OATH				Administrative Surcharge \$		
I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform				Minimum Fee \$		
the work listed on this application.				State Permit Surcharge Fe	· ////////////////////////////////////	
A	pplicant's Signature/Contractor's Seal and Signature			TOTAL FE	□ Ψ '///////////////////////////////////	