APPLICATION FOR MECHANICAL PERMIT

AN APPLICATION WILL NOT BE CONSIDERED COMPLETE UNLESS ALL QUESTIONS ARE FULLY ANSWERED AND SUPPORTING DOCUMENTS ARE INCLUDED WITH THIS DOCUMENT.

APPLICANT / CONTRACTOR:				
	FIRST	LAST		
ADDRESS:	STREET	CITY	STATE	ZIP
			STATE	ZIP
WORK PHONE#:	HOME PHON	NE#:		
EMAIL:	PA L	ICENSE NUMBER:		
OWNER NAME: (IF DIFFEREN	T THAN ABOVE)			
	FIRST	LAST		
ADDRESS:				
NO.	STREET	CITY	STATE	ZIP
WORK PHONE#:	HOME PHONE#:	EMAIL:		
NEW: ALTERATION:	REPAIR: ADD	DITION:		
OIL: GAS:	LPG: ELECTRIC:			
RESIDENTIAL:	NON-RESIDENTIAL:	COST OF WORK: \$		
				-
DESCRIPTION OF WORK: _				
				<u>.</u>
	QUIRES 2 SETS OF SIGNED & SEA S RESPONSIBLE FOR ARRANGIN			
I (we) hereby apply for appro-	val of this application for an ele	ctrical permit for the purposes	s stated herein. Al	l sketches,
plans, or any other supporting	g data shall be considered as pa	rt of this application. I (we) fu	rther certify that t	
application with all supportin	g data is true and correct to the	e best of my (our) knowledge a	ind belief.	
DATE:	SIGNATURE:		_ (LAND OWNER (OR AGENT)
	OFFICIAL USE – DO NOT	WRITE BELOW THIS LINE		
В	UNIT #:	LOT #:		
PERMIT NUMBER:			PERI	MIT FEE
BUILDING CODE OFFICIAL	:		\$	
	PRINT			
SIGNATURE:	DA	ATE APPROVED:		
	OFFICIAL DOCUMENT			