

## ELECTRICAL PERMIT APPLICATION

City Provided Permit #	
Date:	
Address of Request:	
Tax Map #	Current Zoning:
Is this site located within	the boundaries of the historic district?
Any conditions of zoning,	CUP's, etc.?
Description of Work:	
Electrician Information Name:	
E-mail address:	
Phone number:	
Property owner informa	tion
Property owner (please pr	rint):
Signature of property own	ner:



## **NOTICE**

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 120 DAYS OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

Signature of Contra	actor:		
CITY STAFF ONLY	7		
Permit Issued By:			
Dote:	Total Fee		