

ELECTRICAL PERMIT APPLICATION

SITE ADDRESS:			
APN:			
		ocations of trenches, poles, light standards or	
	_	ed to the building. Include electrical one-line	if appropriate.
OWNER:			
ADDRESS:			
PHONE NUMBER:			
EMAIL			
PROJECT VALUE: \$			
SERVICE #1 : □ New	☐ Existing	AMPS	
SERVICE VOLTAGE:	□ THREE PHASE	☐ SINGLE PHASE	
WIRING: □ 3 WIRE	☐ 4 WIRE	NUMBER OF CIRCUITS:	
SERVICE #2 : □ New	☐ Existing	AMPS	
SERVICE VOLTAGE:	THREE PHASE	☐ SINGLE PHASE	
WIRING: □ 3 WIRE	☐ 4 WIRE	NUMBER OF CIRCUITS:	
Other Project Information:			
INSTALLER NAME:			
INSTALLER ADDRESS:			
PHONE NUMBER:			
LICENSE NUMBER:			
SIGNATURE		DATE	_