## CITY OF PETAL ELECTRICAL PERMIT

Number

JOB ADDRES Applicant to complete numbered spaces only. JOB ADDRESS BLK TRACT LOT NO. 1 LEGAL DESC. ( SEE ATTACHED SHEET) ZIP PHONE MAIL ADDRESS OWNER 2 LICENSE NO. PHONE CONTRACTOR MAIL ADDRESS 3 LICENSE NO. MAIL ADDRESS PHONE ARCHITECT OR DESIGNER MAIL ADDRESS PHONE LICENSE NO. ENGINEER 5 PHONE BRANCH MAIL ADDRESS LENDER 6 USE OF BUILDING REPAIR □ NEW ADDITION ALTERATION Class of work: Describe work: PERMIT FEES VALUATION OF JOB: Each No. Fee SPECIAL CONDITIONS: Total RECEPTACAL Outlets LIGHT SWITCH Total LIGHTING Fixtures **FIXTURES** APPROVED FOR ISSUANCE BY APPLICATION ACCEPTED BY PLANS CHECKED BY RANGES CLO. DRYER WTR. HTR. STA. COOK TOP GARBAGE DISP. NOTICE DISH. WASH. CLOTHES WASH. SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING, SPACE HTR. STA. APPL. 1/, H.P. MAX HEATING, VENTILATING OR AIR CONDITIONING.
PERMITS SHALL EXPIRE AND BECOME NULL AND VOID IF WORK AUTHORIZED BY SAID BUILDING PERMIT IS NOT COMMENCED, HAVING CALLED FOR AND RECEIVED A SATISFACTORY INSPECTION WITHIN SIX (6) MONTHS FROM THE DATE OF ISSUANCE OF THE PERMIT, OR UP WORK IS NOT MOTORS: H.P. COMPLETED WITHIN EIGHTEEN (18) MONTHS FROM THE DATE OF ISSUANCE OF THE BUILDING PERMIT. I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THAT SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE NO. TRANS. OF WORK WILL BE COMPLIED WITH, WHETHER SPECIFIED HEREIN OR NOT, THE GRANTING OF SIGNS A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS NO. LAMPS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF TEMP. POWER POLE UNDGD CONSTRUCTION. SERVICE 0-200A 201-400A SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT (DATE) □ NEW 401-600A ☐ CHANGE OVER 600A PERMIT ISSUING FEE SIGNATURE OF OWNER (IF OWNER BUILDER) (DATE) TOTAL FEE

WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT

PLAN CHECK VALIDATION

M.O.

CK.

CASH

PERMIT VALIDATION

M.O.

CASH