



ELECTRICAL PERMIT APPLICATION

100 NW 1st Avenue Delray Beach FL 33444
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Website: mydelraybeach.com

PROPERTY CONTROL #: _____

PLEASE PRINT:

JOBSITE ADDRESS _____
PROPERTY OWNER NAME _____
HOME PHONE (_____) _____ CELL _____
PROPERTY OWNER ADDRESS _____
ELECTRICAL CONT'R (COMPANY) NAME _____
ELECTRICAL CONT'R (COMPANY) ADDRESS _____
CITY _____ ST _____ ZIP _____
BUS. PHONE (_____) _____ CELL _____
FAX _____ E-MAIL _____

FOR OFFICE USE ONLY:

BLDG. PERMIT #: _____
ELEC. PERMIT #: _____
PERMIT FEE: _____
PLAN CHECK FEE: _____
MCR #: _____

APPROVALS:
ELEC: _____ DATE: _____
FIRE: _____ DATE: _____

NOTE: PERMIT EXPIRES IF WORK IS NOT STARTED WITHIN 180-DAYS OR IF ACTIVITY LAPSES FOR 180 DAYS. PLANS MUST BE ON THE JOB SITE FOR ALL INSPECTIONS. FINAL INSPECTION IS REQUIRED ON ALL PERMITS.

TYPE OF INSTALLATION (PLEASE CHECK ALL WORK TO BE PERFORMED BY A SINGLE ELECTRICAL CONTRACTOR. EACH SEPARATE COST TO INCLUDE LABOR & MATERIAL)
NEW CONSTRUCTION / \$
ALTERATION / \$
POOL/SPA (SEPARATE APP) / \$
GENERAL REPAIR / \$
GENERATOR / \$
SLAB INCLUDED? Y N (SEPARATE APP)
SITE LIGHTING / \$
FIRE ALARM (3 SETS OF PLANS REQD) / \$
TEMP. SERVICE/POLE / \$
LOW VOLTAGE:
BURGLAR ALARM / \$
VOICE, DATA, ETC. / \$
SERVICE CHANGE / \$
EXISTING SERVICE SIZE:
PROPOSED SERVICE SIZE:

DESCRIPTION OF WORK (Scope of work, # devices, etc.): _____

SIGNATURE OF QUALIFIER _____ CONTR. REGISTRATION # _____ WORKERS COMP # _____ OR EXEMPT (FID /FEIN) # _____

STATE OF _____
COUNTY OF _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20____ by _____.

Personally Known _____
OR
Produced Identification _____
Type of Identification Produced _____

Signature of Notary Public _____

(SEAL)