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|---|--|-------------------------------|---|----------------------------|--|
| TOWN OF CLEVELAND INSPECTION SERVICES DIVISIONS | | ELECTRICAL PERMIT APPLICATION | | BUILDING PERMIT # _____ | |
| IMPORTANT - Complete ALL items applicable to the proposed installation | | | | | |
| JOB LOCATION | | | | | |
| Address _____ | | | | Verified by _____ | |
| Sundivision _____ | | | | Lot _____ | |
| (If no recorded map, give metes & bounds) | | | | | |
| Name of Owner _____ | | | Name of Contractor _____ | | |
| Address _____ | | | Address _____ | | |
| City _____ State ____ Zip _____ | | | City _____ State ____ Zip _____ | | |
| Phone _____ | | | Phone _____ | | |
| APPLICATION IS HEREBY MADE TO WIRE FOR INSTALL ELECTRICAL EQUIPMENT AS LISTED HEREIN: WORK TO BE PERFORMED | | | | | |
| <div><div><input type="checkbox"/> Temporary Service <input type="checkbox"/> Fixtures/Lamps, Tubes <input type="checkbox"/> Outlets <input type="checkbox"/> Dryer <input type="checkbox"/> Range/Range Top <input type="checkbox"/> Oven <input type="checkbox"/> Fans/Motors <input type="checkbox"/> Circuits</div><div><input type="checkbox"/> Switches <input type="checkbox"/> Water Heater <input type="checkbox"/> Space Heaters <input type="checkbox"/> Air Conditioner <input type="checkbox"/> Service Repair <input type="checkbox"/> Mainline Service Switch <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Welders</div><div><input type="checkbox"/> Heating <input type="checkbox"/> Furnace <input type="checkbox"/> Capacitors <input type="checkbox"/> Transformers <input type="checkbox"/> Generators <input type="checkbox"/> Service Upgrade <input type="checkbox"/> Low Voltage Wiring <input type="checkbox"/> Signs <input type="checkbox"/> Other</div></div> | | | | | |
| Select Appropriate Item(s) Below | | | | | |
| <input type="checkbox"/> NEW RESIDENTIAL STRUCTURES, PER DWELLING UNIT (\$75.00 plus \$25.00 per each 100 amperes increment of service) Total amperes _____ Total dwelling units _____ | | | <input type="checkbox"/> NEW COMMERCIAL STRUCTURES PER UNIT (\$400.00 plus \$100.00 per each 100 amperes increment of service) Total amperes _____ Total units _____ | | |
| <input type="checkbox"/> NEW MULTI-FAMILY RESID. (Apartments/Condos) (\$25.00 plus dwelling unit, plus \$25.00 per each 100 amperes increment of service) | | | <input type="checkbox"/> EXISTING COMMERCIAL STRUCTURES PER UNIT (\$100.00 plus \$100.00 per each 100 amperes of service increase) Total amperes increased _____ Total units _____ | | |
| <input type="checkbox"/> EXISTING RESIDENTIAL STRUCTURES PER DWELLING UNIT (\$50.00 plus \$25 per each 100 amperes of service increase) Total amperes _____ Total dwelling units _____ | | | <input type="checkbox"/> COMMERCIAL, COMPLETE RE-WIRING WITH NO SERVICE CHANGE (\$300.00) | | |
| <input type="checkbox"/> RESIDENTIAL, COMPLETE RE-WIRING (\$75.00, plus \$10.00 per each additional circuit) Number of additional circuits _____ | | | <input type="checkbox"/> SWIMMING POOLS - \$50.00 per pool <input type="checkbox"/> SIGNS - \$50.00 per permit <input type="checkbox"/> TEMPORARY SERVICE - \$5.00 | | |
| FOR NON RESIDENTIAL ONLY: State of Alabama Construction Industry Craft Training (CICT) Fee (\$1.00 PER \$1,000.00) | | | | | |
| Total Construction Cost \$ _____ | | | | | |
| Application is hereby made for an electrical permit to accomplish the work as described. I agreed that all requirements of the electrical code, the zoning ordinance, and all other pertinent laws and ordinances of the Town of Cleveland reglating electrical wiring and installation or electrical equipment shall be compiled with in pursuit of this work whether or not specified herein. | | | | | |
| ELECTRICAL CONTRACTOR: _____ | | | | | |
| ADDRESS: _____ Phone: _____ | | | | | |
| Signature of Master Electrician or property owner, if performing his own work) | | | | | |
| Building Official | | Date | | Permit Fee | |
| _____ | | _____ | | _____ | |
| Permit # | | _____ | | | |