

JOB ADDRESS: _____

PERMIT # _____

- RESIDENTIAL OTHER ALT. ADD.
- COMMERCIAL NEW OPEN

APPLICATION FOR ELECTRIC WIRING PERMIT
CITY OF ALLIANCE
 504 E. Main St., Alliance, OH 44601
 Phone 330-823-5122

DATE _____

ESTIMATED VALUE _____

A. APPLICATION FEE: \$ _____
(Non Refundable)

OWNER _____

B. Permit Inspection Fee

ADDRESS _____

(1) New building construction
_____ sq. ft x _____ c = _____

CITY & ZIP _____ PHONE _____

(2) Alterations, repairs, upgrades
_____ sq. ft x _____ c = _____

FAX _____ CELL _____

Plus add-ons:

CONTRACTOR _____

_____ Service entrance work _____

ADDRESS _____

_____ Meters, transformers _____

CITY & ZIP _____ PHONE _____

_____ Dedicated circuits _____

FAX _____ CELL _____

(3) Misc., open areas

_____ Temporary service _____

_____ Permanent service _____

_____ Transformers = _____

_____ Circuits = _____

_____ Meter = _____

I hereby verify the truth and accuracy of this application.

Signature _____ Date _____

(4) Fire Detection Devices _____

OWNER CONTRACTOR AGENT

(5) Special Inspection _____

SPECIAL INSTRUCTIONS, COMMENTS, CONTINGENCIES

CASH _____

CK. # _____ 1% State Fee _____

TOTAL: _____