

HOLMES COUNTY BUILDING DEPARTMENT

812 South Waukesha Street

Telephone: 850-547-1110 Fax: 850-547-4665

Building Official: Roger L. Williams

ELECTRICAL PERMIT APPLICATION

DATE: _____ PERMIT # REFERENCE: _____ *POWER COMPANY: _____
ELECTRICAL USE // PROPOSED USE: _____ SERVICE SIZE: _____
DESCRIPTION/SCOPE OF WORK TO BE PERFORMED: _____

OWNER'S NAME: _____ PHONE # _____
ADDRESS: _____ CITY, STATE, ZIP _____
ELECTRICIAN: _____ PHONE# _____ CELL# _____
DIRECTIONS TO PROPERTY: _____

PARCEL ID# _____

OWNER'S AFFIDAVIT: I certify that the information stated on this application is true and correct. Work will be done in compliance with the National Electrical Code. Failure to comply may result in a Stop Work Order or Electrical Disconnect.

Signature of Owner or Agent _____ DATE _____

Signature of Contractor _____ DATE _____

Sworn to and Subscribed before me
BY: _____
Who is personally known or has produced: _____

Sworn to and Subscribed before me
BY: _____
Who is personally known or has produced: _____

As Identification and who Did/Did Not take an Oath
This _____ Day of _____ 20__

As Identification and who Did/Did Not take an Oath
This _____ Day of _____ 20__

Notary Signature: _____

Notary Signature: _____

Commission/Expiration: _____

Commission/Expiration: _____

SEAL:

SEAL:

Setback County Ordinance #88-02 Applicable To All Buildings
15' Front & Back 10' Each Side

FOR OFFICE USE ONLY

Elec Fee _____
ON FILE: 911 _____ LEGAL _____ DISCLOSURE _____
LANDOWNER AFFIDAVIT _____
TOTAL CHARGES _____

Application is hereby made to obtain a permit to do the work as indicated. I certify that all work will be performed to meet the National Electric Code.

Permit # _____

Applicant Name _____