



ELECTRICAL PERMIT APPLICATION

PROPERTY/OWNER INFORMATION	
Project Address:	Master Permit#:
Owner Name:	Phone#:
Owner Address:	

CONTRACTOR INFORMATION	
Contractor Name:	Phone#:
Contractor Address:	
Email:	License#:

PROJECT INFORMATION	
Class of Work: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair	
Describe Work and Valuation of Project:	

Item	Qty	Amount/Each	Total	Item	Qty	Amount/Each	Total
Temporary Cut-In (TCI) or Meter Loop & Service (MLS)				Motors, Ceiling Fan, A/C & Furnace fans, Exhaust			
Service Reconnection				Range Vent Fan			
Receptacles/Switches				Central heat			
Range, Cook top, Dishwasher, Disposal, Oven, Dryer				Solar Photovoltaic Panels &/or Solar Water Heating Systems			
Sign circuit-Including inside signs				Temporary Power Pole			
X-ray machines				Application preparation fee			
Lighting Fixture				Minimum Permit fee			

PROPERTY OWNER/AGENT AUTHORIZATION		
<p>Property Owner Consent/Agent Authorization: By my signature, I hereby affirm that I am the property owner of record, or if the applicant is an organization or business entity, that authorization has been granted to represent the owner, organization or business in this application. I certify that the preceding information is complete and accurate, and it is understood that I agree to the application being requested for this property. Additionally, my signature below indicates my awareness of the fee required at the time of the application submittal and any additional fees as noted in the City's fee schedule. This fee is non-refundable even in the event of application withdrawal. I have the power to authorize and hereby grant permission for City of Jersey Village officials to enter the property on official business as part of the application process. Separate applications need to be made and permits required for driveway, electrical, ventilating or air conditioning work.</p>		
_____ Signature of Contractor/Authorized Agent	_____ Printed Name	_____ Application Date

FOR OFFICE USE ONLY	
Building Permit Number: _____	Date Submitted: _____
Approved By: _____	Date Approved: _____

NOTE: Only complete applications shall be accepted and payment received at time of submission.