

ELECTRICAL PERMIT APPLICATION

Date: _____ Permit No.# _____

THIS PERMIT IS HERE BY ISSUED TO: Permit Fee:\$ _____

Electrical Contractor: _____ Phone# _____

Address: _____

Email: _____ NC Electrical License #: _____

Project Address: _____ Total Sq. Ft. _____

Owner/Tenant of Property: _____

Address: _____

TOTAL PROJECT COST: \$ _____

OCCUPANCY TYPE:(CHECK ONE) RESIDENTIAL COMMERCIAL

WORK BEING PERFORMED WILL BE INTERIOR ONLY EXTERIOR ONLY BOTH
Be advised if work is being done on the exterior, a separate zoning permit is required.

Check One: Replacement: _____ Remodel: _____ Repair: _____ New Installation: _____

FOR INSTALLATION OF:

NO. OF OUTLETS..... _____

NO. OF CIRCUITS..... _____

SIZE OF SERVICE(AMPS)..... _____

DETAILED DESCRIPTION OF WORK BEING PREFORMED*:

Contractor/Applicant Printed Name/Signature

- Refer to generator checklist for additional requirements:
<https://jacksonvillenc.gov/168/Applications-Checklists>