

Calhoun County Building Department

ELECTRICAL PERMIT APPLICATION

DATE: _____

(A) OWNER'S NAME: _____

(B) OWNER'S MAILING ADDRESS: _____

(C) OWNER'S PHONE NUMBER _____ CELL# _____

(D) OWNER'S EMAIL: _____

(E) CONSTRUCTION 911 ADDRESS: _____

(F) PARCEL ID #: _____

(G) DESCRIPTION OF WORK: _____

(H) CONTRACTOR'S NAME: _____

(I) CONTRACTOR'S MAILING ADDRESS: _____

(J) CONTRACTOR'S PHONE NUMBER: _____

(K) CONTRACTOR'S FLORIDA LICENSE NUMBER: _____

(L) CONTRACTORS EMAIL ADDRESS: _____

(M) **TEMPORARY POLES ARE LIMITED TO 60 AMPS MAXIMUM ON VACANT PROPERTIES AND PROPERTIES**

WITHOUT A PRIMARY STRUCTURE.

(N) **ALL POWER POLES TO BE WIRED AS PERMITTED.**

DECLARATION STATEMENT

I DO HEREBY AGREE TO COMPLY WITH ALL FLORIDA BUILDING CODES AND CALHOUN COUNTY LDR'S RELATED TO CONSTRUCTING THE ABOVE DESCRIBED STRUCTURES. UPON COMPLETION OF BUILDING THE NOTED STRUCTURES, I WILL PROVIDE ANY DOCUMENTS REQUESTED BY THE CALHOUN COUNTY PLANNING/BUILDING DEPARTMENT IN ORDER TO ASSURE COMPLIANCE.

PRINTED NAME: _____ SIGNATURE: _____