

Electrical permit application

Job site address: _____ Unit number: _____ Zip code: _____

 Total project valuation: \$ _____ Applicant is: Owner and occupant Contractor
 (must include fair market value of material and labor cost)

| Property owner *REQUIRED* | | | |
|---|---|---|--|
| Name: _____ | | Email: _____ | |
| Address: _____ | | Unit number: _____ | |
| City: _____ | | State: _____ Zip code: _____ | |
| Phone: _____ | | | |
| Contractor | | | |
| Name: _____ | | Email: _____ | |
| Address: _____ | | Unit number: _____ | |
| City: _____ | | State: _____ Zip code: _____ | |
| Phone: _____ | | MN State EL License #: _____ | |
| Property use | Type of structure | Type of work | |
| <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Public | <input type="checkbox"/> Principal building <input type="checkbox"/> Garage <input type="checkbox"/> Accessory building <input type="checkbox"/> Temporary building <input type="checkbox"/> Swimming pool <input type="checkbox"/> Other: _____ | <input type="checkbox"/> New building <input type="checkbox"/> Existing building: <input type="checkbox"/> Addition <input type="checkbox"/> Remodel <input type="checkbox"/> Repair/replace <input type="checkbox"/> Solar panels | <input type="checkbox"/> Disconnect <input type="checkbox"/> Code compliance <input type="checkbox"/> Sign – other <input type="checkbox"/> Sign – permanent <input type="checkbox"/> Sign – temporary <input type="checkbox"/> NSP savers switch |
| Electrical item(s) – indicate quantity for each | | | |
| _____ Air conditioner _____ Annunciator _____ Appliance _____ Boiler/hot water _____ Branch circuit _____ Central station control _____ Control panel _____ Disconnect _____ Feeder | _____ Furnace _____ G.F.I. receptacle _____ Heat detector _____ Indicating device _____ Initiating device _____ Office furniture – feeds only _____ Office furniture – partition wiring | _____ Opening – light _____ Opening – other _____ Opening – receptacle _____ Opening – switch _____ Pool/spa/hot tub _____ Potable hot water _____ Refrigeration equipment _____ See remarks _____ Service | _____ Sign _____ Smoke detector _____ Solar panel _____ Kw _____ Subpanel _____ Temporary service _____ Ventilation/fan _____ Water flow detector _____ Whirlpool tub |
| Specific description of work to be completed | | | |
| | | | |

Permit will become void one year from date of issuance. Permits issued and inspections made by the city are a public service and do not constitute any representation, guarantee or warranty, either implied or expressed, to any person as to the condition of the building or conformance to applicable construction codes. The Undersigned acknowledges that this application has been read and that the above is correct and agrees to comply with all the ordinances and laws of the City of St. Louis Park regulating building construction. Some or all of the information that you are asked to provide on the application is classified by State law as either private or confidential. Private data is information which generally cannot be given to the public but can be given to the subject of the data. Confidential data is information which generally cannot be given to either the public or the subject of the data. Our purpose and intended use of this information is annually to update our records and records of other governmental agencies required by law. If you refuse to supply the information, the permit may not be issued.

Applicant name and signature: _____ Date: _____

Office use only

 Permit #: _____ Fee: _____ Ck#: _____ CC Cash
 Entered: _____ Zoning app/date: _____ Approval/date: _____ Issued: _____

| Electrical permit fees | Conditions of issuance |
|------------------------------|------------------------|
| Electrical permit fee: _____ | |
| State surcharge: _____ | |
| Investigation fee: _____ | |
| Total fees due: _____ | |

| Required inspections | | |
|--------------------------|--------------------------|------------------------|
| <input type="checkbox"/> | Default | |
| <u>Add</u> | <u>Delete</u> | |
| <input type="checkbox"/> | <input type="checkbox"/> | Consultation |
| <input type="checkbox"/> | <input type="checkbox"/> | Electrical service |
| <input type="checkbox"/> | <input type="checkbox"/> | Final |
| <input type="checkbox"/> | <input type="checkbox"/> | NFPA form |
| <input type="checkbox"/> | <input type="checkbox"/> | No inspection required |
| <input type="checkbox"/> | <input type="checkbox"/> | Rough-in |
| <input type="checkbox"/> | <input type="checkbox"/> | Rough-in ceiling |
| <input type="checkbox"/> | <input type="checkbox"/> | Rough-in slab |
| <input type="checkbox"/> | <input type="checkbox"/> | Rough-in wall |
| <input type="checkbox"/> | <input type="checkbox"/> | Temporary service |
| <input type="checkbox"/> | <input type="checkbox"/> | Trench |