



CITY OF LAKE CITY

ELECTRICAL PERMIT APPLICATION

Required Information

Office Use Only
Permit # _____

(PLEASE ALLOW MINIMUM 1 WEEK FOR PERMIT PROCESS COMPLETION)
APPLICATIONS WILL NOT BE ACCEPTED WITHOUT ALL REQUIRED DOCUMENTS

PLEASE PRINT CLEARLY

Contractor Name: _____
License Holder: _____ Contact Phone #: _____
Date Submitted: _____ Property Parcel #: _____
Job Name: _____
Job Address: _____
Property Owner: _____
Tenant Name: _____

<input type="checkbox"/> Residential	<input type="checkbox"/> Stand Alone
<input type="checkbox"/> Commercial	<input type="checkbox"/> Sub for Master
Permit # _____	_____

***** CONTRACTOR'S LICENSE AND INSURANCES MUST BE CURRENT PRIOR TO APPLICATIONS BEING PROCESSED*****

IF YOU ARE THE PRIME CONTRACTOR A RECORDED NOTICE OF COMMENCEMENT FOR JOBS OVER \$2500 (RESIDENTIAL OR COMMERCIAL) MAY BE REQUIRED.

INCLUDE THE NUMBER OF:

RESIDENTIAL MAXIMUM FEE (APPLICABLE TO CHURCHES ALSO)	25.00
COMMERCIAL MINIMUM FEE	25.00
OUTLETS & FIXTURES (1-10) _____ x \$	10.00 = _____
OUTLETS & FIXTURES _____ x \$	5.00 = _____
** \$5 FOR EACH INCREMENT OF 40 OVER THE FIRST 10	
RANGE OUTLETS _____ x \$	2.50 = _____
WATER HEATER OUTLETS _____ x \$	2.50 = _____
COMMERCIAL WASHER/DRYER OUTLETS _____ x \$	5.00 = _____
OVEN RANGE HOOD FOR LIGHTS/FIXTURES (COMMERCIAL) _____	= _____
_____ x \$	10.00 = _____
INTERCOM _____ x \$	5.00 = _____
TELEPHONE SYSTEM _____ x \$	5.00 = _____
MOTORS UP TO 10 HP _____ x \$	3.00 = _____
MOTORS OVER 10 HP _____ x \$	4.00 = _____
WINDOW AIR CONDITIONER _____ x \$	3.00 = _____
2-3 TON AIR CONDITIONER _____ x \$	5.00 = _____
3 1/2 - 5 TON AIR CONDITIONER _____ x \$	7.00 = _____
7 1/2 - UP TON AIR CONDITIONER _____ x \$	10.00 = _____
X-RAY MACHINE _____ x \$	10.00 = _____
DIATHERMIC _____ x \$	10.00 = _____
SIGNS (EACH CIRCUIT) _____ x \$	2.50 = _____
SIGNS LESS THAN 18 SQ FT _____ x \$	2.50 = _____
SIGNS 18 - 59 SQ FT _____ x \$	3.00 = _____
SIGNS 60 - 199 SQ FT _____ x \$	5.00 = _____
SIGNS 200 - 299 SQ FT _____ x \$	10.00 = _____
SIGNS 300 - MAX 400 SQ FT _____ x \$	25.00 = _____
COMMERCIAL RADIO TRANSMISSION STATIONS _____	= _____
_____ x \$	25.00 = _____
AMATUER OR HAM STATIONS _____ x \$	25.00 = _____

Contractor Name: _____

Job Address: _____

SWITCHBOARDS/GENERATORS UP TO AND INCLUDING 50 KW

_____	x \$	5.00	= _____
50 - 100 KW	_____ x \$	10.00	= _____
OVER 100 KW	_____ x \$	15.00	= _____
METERS 0 - 200 AMP	_____ x \$	25.00	= _____
201 - 400 AMP	_____ x \$	25.00	= _____
401 - 600 AMP	_____ x \$	25.00	= _____
OVER 600 AMP	_____ x \$	25.00	= _____
EACH ADDITIONAL METER BOX	_____ x \$	5.00	= _____
TEMPORARY POLE	_____ x \$	10.00	= _____
SRVC POLE FOR TRLR & PLUG OR DIRECT CONNECTION	_____ x \$	25.00	= _____

Fees Subtotal = _____

Plan Review Fee - 50% OF FEE TOTAL (Calculated by this dept.) = _____

Permit Fee Total = _____

Contractor / Owner Signature: _____

Electronic Check Re-presentation Policy: In the event that your check is returned unpaid for insufficient or uncollected funds, we may re-present your check electronically. In the ordinary course of business, your check will not be provided to you with your bank statement, but a copy may be obtained by contacting your financial institution. A fee may be charged if the check is re-presented electronically. Effective date is August 15, 2007