



BUILDING PERMIT APPLICATION ELECTRICAL

Community Development Department
55 South State Street
(801) 525-2780

Please print legibly and complete all areas:

Project address:			
Project Value: \$	check one:	<input type="checkbox"/> contract value	<input type="checkbox"/> estimate
Applicant's name:			
Applicant's Address:			
Phone:	Cell:	EMAIL:	
Owner's Name:			
Owner's Address:			
Phone:	Cell:	EMAIL:	
What type of electrical work are you doing? (check all that apply)			
Type of Building:	<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	
New Service _____ AMP	<input type="checkbox"/> Service upgrade	from _____ AMP to _____ AMP	
Service Repair	Panel included?		
Relocate service from _____	to _____		
New wiring (describe):			
New receptacles		New fixtures	
other (describe):			
Electrical Contractor:		Utah State Lic. #	
Address:		Phone No:	

Applicant's signature _____ date

Accepted by _____ date