

APPLICATION FOR ELECTRICAL PERMIT
INSPECTIONS & CODE
COLUMBUS, GEORGIA

DATE _____ PERMIT NO. _____

DISTRICT _____

ELECTRICAL CONTRACTOR _____

ADDRESS OF JOB _____

OWNER OR OCCUPANT _____

TYPE OF POWER

TEMPORARY LIGHTS & POWER CONSTRUCTION
 ADDITIONAL WIRING LOW VOLTAGE

TYPE OF OCCUPANCY

RESIDENTIAL COMMERCIAL INDUSTRIAL INSTITUTIONAL
 ACCESSORY STRUCTURE TRAILER SIGN

WORK TO BE DONE IN

NEW BUILDING BUILDING ADDITION
 EXISTING BUILDING MOVED BUILDING

MAIN SERVICE SWITCH

AMPERE _____ NUMBER OF METERS _____

DESCRIPTION OF WORK TO BE PERFORMED

I certify that the information given in this application is true and correct to the best of my knowledge and the work authorized upon this application is to be done in accordance with the Electrical Code of Columbus, Georgia.

CONTRACTOR _____

PERMIT

PHONE _____

FEE \$ _____