

APPLICATION FOR ELECTRICAL PERMIT (Contractor)

Northern Kentucky Area Planning Commission 2332 Royal Drive, Ft. Mitchell, KY P) 859-957-2408 F) 859-331-8987

Please type or print Required fields

Permit type: Construction Temporary Multifamily Single Family Dwelling Commercial Industrial

Occupational license #: _____ Building Permit #: _____

City / County of: _____

Address of the property to be inspected: _____

Business name / Tenant suite: _____

	Owner	Plans By	Electrical Contractor / Applicant
Name			
Address			
City			
State			
ZIP Code			
Phone #			
Fax #			
Cel #			
Email			
Fed Tax ID #	N/A	N/A	
	CE #		ME #

Utility company (Required): Duke Owen County Cooperative

Proposed building activity (Required):

- | | | |
|---|---|---|
| <input type="checkbox"/> New Building | <input type="checkbox"/> Alteration to Building | <input type="checkbox"/> Agriculture / Farm Exemption |
| <input type="checkbox"/> Addition to Building | <input type="checkbox"/> Repair / Replacement | <input type="checkbox"/> Other _____ |

Indicate the amperage of the new/existing service: _____ **Estimated cost of electric work:** _____

Existing use of building and/or space: _____

Is construction temporary service requested?: Yes No

Description of proposed activity and/or use: _____

Please select the number of inspections that are being requested or type in how many needed for each (Required):

Ceiling Rough-in 0 1 2 3 4 5 _____ Underground 0 1 2 3 4 5 _____ Under Slab 0 1 2 3 4 5 _____
 Wall Rough-in 0 1 2 3 4 5 _____ Final 0 1 2 3 4 5 _____ Other _____

Check all that apply below:

Added wiring		Hazardous location		Mobile home wiring		Service only		Underground wiring	
Festival wiring		Heating/cool wiring		Outbuilding		Service survey			
Field consultation		Industrial wiring		Pool / fountain wiring		Wiring under slab			
Garage		Low voltage wiring		Service / added wiring		Tenant finish			
Other									

Complete all that apply below:

	OH	UG	Volts	Amps	Phase 1 or 3	# of meters	Release to power company --Inspectors only—Date below
Const. temp							
Permanent Ser							

Indicate by number how many apply (1, 2, 3, etc.):

# Ac / hp		# Blowers		# Circuits		# Controllers		# Dishwashers		# Disposals hp	
# Dryers Total kw		# Electric furnaces Total kw		# Exit lights		# Generators		# Duct Heaters Total kw		# Water Heaters Total kw	
# Kitchen Equip.		# Light fix		# Emergency lights		# Ovens Total kw		# Ranges Total kw		# Roof top HVAC	
# Signs		# Space heaters Total kw									
# 1 P Motors:		& Total hp:		# 3 P Motors:		& Total hp:					

Complete all that apply below:

	Wire size cu/al	O.C.P.D.	Mounting		Wire size cu /al	O.C. P. D	Mounting
1 Ph. Transformer				3 Ph. Transformer			
1 Ph. Transformer				3 Ph. Transformer			
1 Ph. Transformer				3 Ph. Transformer			

No work shall be started until proper permits have been issued. Fees are non-refundable. All actions taken in connection with this application are based on the representations by the applicant that the submitted information and attachments are correct and accurate and the burden of proof of its correctness and accuracy is the responsibility of the applicant. The applicant is responsible for meeting all requirements of the National Electric Code and/or the Kentucky Building Code.

Owner or Authorized Agent (Signature): _____ Date: _____

Owner or Authorized Agent (Please type): _____ Date: _____

----- *To be completed by Administrative Official* -----

Permit #: _____	Date Received: _____			
Date: _____	Electric Fee: _____	App.	App. With Conditions	Disapp.
Cash Paid: _____	Total: _____	Electric	_____	_____
Check #: _____	Permit Issued: _____			
<input type="checkbox"/> Workers Comp.	<input type="checkbox"/> Contractors License	<input type="checkbox"/> Occupational License		
<input type="checkbox"/> Liability Insurance	<input type="checkbox"/> Masters License			

Signature of Administrative Official: _____