City of Loxley
Electrical Permit Application

Permit # _____

Job Address:		
Lot :	PPIN :	
Owner:	Address:	Phone:
Contractor:	Address:	Phone:
Engineer:	Address:	Phone:
Type Installation: Permanent _____ Temporary _____		
Class of Work: Residential _____ Commercial _____ Mobile Home _____ Pool _____ Other _____		
Describe Work:		
Valuation:	Permit Fee:	
Special Conditions:		
Approved for Issuance by:	Date:	

NOTICE

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.

IT IS UNDERSTOOD THAT THIS PERMIT IS NOT VALID FOR ANY PURPOSE UNTIL IT HAS BEEN SIGNED BY THE OWNER OF THE PREMISES COVERED BY THE PERMIT.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

Signature of Contractor or Authorized Agent (Date)	Signature of Owner (Date)

Permit Validation: Check Cash Debit/Credit