



ELECTRICAL SUBCODE TECHNICAL SECTION



A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block _____ Lot _____ Qualification Code _____

Work Site Location _____

Owner in Fee _____

Address _____

Tel (_____) _____

Contractor _____

Address _____

Tel (_____) _____ FAX (_____) _____

Contractor License No. _____

Federal Emp. No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

[] Pole/Pad # _____ [] Temporary [] Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ _____

JOB SUMMARY (Office Use Only)

| PLAN REVIEW | Date | Initial | INSPECTIONS | Dates (Month/Day) | | |
|-----------------------------|------|---------|-------------------------------|-------------------|----------|---------|
| [] No Plans Required | | | Type: | Failure | Approval | Initial |
| Joint Plan Review Required: | | | Rough | | | |
| [] Building [] Plumbing | | | Barrier-Free | | | |
| [] Fire [] Elevator | | | Trench | | | |
| [] Elec. Plans Approved | | | Temp. Serv. | | | |
| Date: _____ | | | Const. Serv. | | | |
| Approved by: _____ | | | TCO | | | |
| | | | Other | | | |
| | | | Service | | | |
| | | | Final | | | |
| | | | Barrier-Free | | | |
| SUBCODE APPROVAL | | | Temp. Cut-in-Card Date Issued | | | |
| [] CO [] CCO [] CA | | | Final Cut-in-Card Date Issued | | | |
| Date: _____ | | | Annual Pool Inspection | | | |
| Approved by: _____ | | | Date of Grounding and Bonding | | | |
| | | | Certification | | | |

U.C.C. F120 (rev. 07/03) Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

Date Received
Control #

Date Issued
Permit #

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

[] Licensed Elec. Contractor [] Certifd Landscape Irrigation Contr'r [] Exempt Applicant

D. TECHNICAL SITE DATA

QTY. SIZE ITEMS

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors—Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UW Lights

Storable Pool/Spa/Hot Tub

KW Elec. Range/Receptacle

KW Oven/Surface Unit

KW Elec. Water Heater

KW Elec. Dryer/Receptacle

KW Dishwasher

HP Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air Handler

KW Baseboard Heat

HP Motors 1/+ HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

FEE (Office Use Only)

\$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____