## City of St. Louis Park Electrical Permit Application

Job Site Address	:			Unit #	7	Zip
Project Valuation		fair market value of material and lo	aho	The Applicant Is:	□ Owner	□ Contractor
(111	usi memae j	V .		er *Required*		
Name		Troperty Ow				
Address				1	 Init #	
Phone ( )					r	
				actor		
Name						
Address						
City		NOT CO.		State	Zıp	
Phone ( )	1 1	MN State	EL			
Property U	se	Type of Structure		Type (	of Work	
□ Residential		□ Principal Building		□ New Building	□ Disco	nnect
☐ Commercial		☐ Garage		☐ Existing Building	$\Box$ Code	Compliance
□ Industrial		☐ Accessory Building		☐ Addition	☐ Sign -	Other
☐ Institutional		☐ Temporary Building		☐ Remodel	☐ Sign -	Permanent
☐ Public		☐ Swimming Pool		☐ Repair / Replace	_	Temporary
		☐ Other		1 1	_	Savers Switch
	•	Electrical Item(s)	(in	dicate quantity for each)		
Air Condition	ner	Furnace		Opening - Light	Sign	า
Annunciator		G.F.I. Receptacle	_	Opening - Other	Smo	oke Detector
Appliance		Heat Detector		Opening - Receptacle	Sub	panel
Boiler / Hot V	Water	Indicating Device	_	Opening - Switch	Ten	nporary Service
Branch Circu		Initiating Device	_	Pool / Spa / Hot Tub		tilation
Central Station		Office Furniture -	_	Potable Hot Water		ipment
Control Pane	1	Feeds Only	_	Refrigeration Equipment		ter Flow
Disconnect		Office Furniture -		See Remarks		ector
Feeder		Partition Wiring		Service		irlpool Tub
		Specific Description o	f Y	Work to be Completed		
guarantee or warranty, ei	ther implied or	date of issuance. Permits issued and inspect expressed, to any person as to the condition peen read and that the above is correct and a	of	the building or conformance to applicable	e construction code	s. The Undersigned
building construction.			-		-	
		on that you are asked to provide on the appli- given to the public but can be given to the su				
either the public or the su	bject of the da	ta. Our purpose and intended use of this information, the permit may not be issued.	orm			
Applicant's Name & Signature Date						
		Print &	Si	gn Name		
OFFICE USE	Permit #	Call	ed	Ck	C C	С СН С
ONLY	Entered _	Zoning App/Date		Approval /Date	Issue	ed

<b>Electrical Permit Fees</b>	Conditions of Issuance
Electrical Permit Fee: State Surcharge: Investigation Fee:  TOTAL FEES DUE:	
	•

	Re	quired Inspections
	Default	
Add	<u>Delete</u>	
		Consultation
		Electrical Service
		Final
		NFPA Form
		No Inspection Required
		Rough-In
		Rough-In Ceiling
		Rough-In Slab
		Rough-In Wall
		Temporary Service
		Trench

thees shown a	re only valid for the year 201.	5: please call for fees	in different years)	
	allation, replacement or repai	-	•	n.
State surcharge is .0005	times the job valuation. Cal	l the Inspections Dep	artment at (952) 924	-2588
for state surcharges on al	l permits valued at \$1,000,00	00.00 or more).		
• When applical	ble, a plan review charge equ	al to 35% of the electr	ical permit fee will be	added.
	<u>Except</u>	ions:		
Installation, replace	e or repair of a <u>single</u> electrica	al appliance or device	within a single-family	dwellin
	shall be \$50.00 + 1.0	00* = \$51.00		
		1 1 111 0156	1 1 00% 0151 00	
Installati	on of a new traffic signal <u>per</u>	location shall be \$150	) + 1.00* = \$151.00	