



ELECTRICAL PERMIT APPLICATION

Job Address: _____

Description: Lot # _____ Blk _____ Tract _____

Owner Name _____

Mailing Address _____

Phone Number _____

Email _____

Contractor Name _____

Mailing Address _____

Phone Number _____

License # _____

Architect/Designer Name _____

Mailing Address _____

Phone Number _____

License # _____

Engineer Name _____

Mailing Address _____

Phone Number _____

License # _____

Lender _____

Mailing Address _____

Phone Number _____

Branch _____



NOTICE: This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced.

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 ordinance governing this type of work will be complied, 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 (if Owner Builder) _____
Date

WHEN PROPERLY VALIDATED, THIS IS YOUR PERMIT.

Plan Check Validation: Check MO Cash Permit Validation: Check MO Cash

APPLICATION ACCEPTED BY: _____ **Date** _____

PLANS CHECKED BY: _____ **Date** _____

APPROVED FOR ISSUANCE BY: _____ **Date** _____