

Community Development and Neighborhood Services

281 N College

Print Name

970-416-2740

Fort Collins, CO 80524 buildingservices@fcgov.com

ELECTRICAL PERMIT APPLICATION Application # ______ Date Received _____

Date

ALL information is REQUIRED. Incomplete applications will not be accepted. Job Site Address Address ___ _____ City/State/Zip _____ **Property Owner Information** Name______Phone Number _____ Address ____ City/State/Zip ○ Single Family Detached ○ Townhome (attached) ○ Duplex RESIDENTIAL O Apartment/Condo Garage/Other Hotel/Motel Medical Office Office COMMERCIAL Bank Bar Church Retail () Restaurant Value of Work Labor and Materials \$ ____ Scope of Work Panel change out Meter change out Upgrade existing wiring O Panel Upgrade (May require additional review time. A commercial panel upgrade of 225A or 3 phase requires a 1 line diagram.) Other electrical alterations Service Upgrade Yes No Existing Amps _____ New Amps_____ Additional Information (if applicable) **Electrical Contractor Information** Name City/State/Zip _____ Address Phone Number _____ Email _____ License Number ME-____ I hereby acknowledge that I have read this application and state that the above information is complete and correct. I agree to comply with all requirements contained herein and city ordinances and state laws regulating building construction. I know that a permit is not valid until it has been paid and issued.

Signature