

ELECTRICAL PERMIT APPLICATION

115 Chatham Street, Sanford, NC 27330

Telephone (919) 718-4654

www.sanfordnc.net

Fax (919) 718-4636

APPLICATION DATE: _____ Stand Alone Permit? New Construction? BldgPermit#: _____

CONSTRUCTION ADDRESS: _____

PARCEL #: _____ POWER SUPPLIER: PROGRESS ENERGY CENTRAL ELECTRIC

OWNER NAME: _____ PHONE #: _____

OWNER ADDRESS (If different from Construction Address): _____

CONTRACTOR NAME: _____ PHONE #: _____

CONTRACTOR ADDRESS: _____ PIN#: _____
(Note: Need PIN# in order to mail in application!)

NEW RESIDENTIAL:

TOTAL AMPERAGE: _____

BASIC FEE: \$ 135.00 (Up to 200 AMPS)

\$20.00 (Per 100 AMPS above 200)

Single-Wide \$55.00

Double-Wide \$55.00

Triple-Wide \$55.00

Modular Home \$75.00

RESIDENTIAL REPAIRS, RENOVATIONS, ALTERATIONS AND ADDITIONS: (Maximum Fee:\$135.00)

BASIC FEE: \$60.00

Basic Fee: _____ \$60.00 plus any of the following:

Plus \$ 5.00 (Per special outlet) How Many? _____ x \$5.00 each = _____

Plus \$25.00 (Per subpanel) How Many? _____ x \$25.00 each = _____

Plus \$40.00 (Per Room Addition) How Many? _____ x \$40.00 each = _____

COMMERCIAL:

TOTAL AMPS: _____ NUMBER OF SPECIAL OUTLETS: _____ NUMBER OF SUBPANELS: _____

0-200 Amps \$115.00 plus \$5.00 per special outlet, plus \$40.00 per subpanel

201-400 Amps \$135.00 plus \$5.00 per special outlet, plus \$40.00 per subpanel

401-600 Amps \$145.00 plus \$5.00 per special outlet, plus \$40.00 per subpanel

601-800 Amps \$165.00 plus \$5.00 per special outlet, plus \$40.00 per subpanel

801-1000 Amps \$175.00 plus \$5.00 per special outlet, plus \$40.00 per subpanel

1001-2000 Amps \$255.00 plus \$5.00 per special outlet, plus \$40.00 per subpanel

2001 & Up Amps \$330.00 plus \$5.00 per special outlet, plus \$40.00 per subpanel

MISCELLANEOUS AND SERVICE CHANGES:

MINIMUM FEE FOR ITEMS NOT SHOWN \$60.00. _____ Explain: _____

CONDITIONAL POWER..... \$60.00. _____

MECHANICAL CHANGE OUTS..... \$40.00. _____

POWER RESTORATION..... \$60.00. _____

ACCESSORY BUILDING..... \$60.00. _____

SERVICE CHANGE 100 AMP OR LESS..... \$60.00. _____ Number of Amps: _____

SERVICE CHANGE (Circle One) 125 - 200 AMP..... \$75.00. _____ Number of Amps: _____

SIGNS..... \$60.00ea. _____ Number of Signs: _____

SPECIAL OUTLETS (\$60.00 plus \$5.00 Each Special Outlets) \$60.00 Plus - Number of Sp. Outlets: _____

SWIMMING POOL GROUNDING..... \$60.00. _____

TEMPORARY SERVICE POLE..... \$60.00. _____

Total: _____

PLEASE NOTE: IF THE QUALIFIER OF THE LICENSE BELOW WILL NOT APPEAR IN PERSON TO OBTAIN PERMIT, THE OPPOSITE SIDE OF THIS APPLICATION MUST BE COMPLETED!

I hereby certify that the information on this application is correct and that all work in connection with the above referenced job will be performed under my supervision and that such work complies with the requirements of the NC State Building Codes and applicable City of Sanford or Lee County Ordinances. Call for inspection at proper stage of work.

CONTRACTOR / APPLICANT _____

DATE _____

N.C. LICENSE NUMBER _____

ELECTRICAL PERMIT APPLICATION

900 Woodland Avenue, Sanford, NC 27330

Telephone (919) 718-4654

www.sanfordnc.net

Fax (919) 718-4637

The City of Sanford/Lee County Inspection Departments require the licensee of a contracting firm to personally appear in our office to submit and pay for permits. Although not recommended, we understand that sometimes it is not always feasible for the licensee to comply. In the event this happens, the following must be completed by the licensee, signed, notarized and returned to this office allowing a bonafide employee of your company to purchase an electrical permit under your license number for the following address: _____

DATE: _____

What type of license do you possess?

- Building N.C. License Number: _____
- Electrical N.C. License Number: _____
- Plumbing N.C. License Number: _____
- Mechanical N.C. License Number: _____
- Other N.C. License Number: _____

Contractor's Name: _____ Business Name: _____

Contractor's Business Address: _____

Telephone Number: _____ Fax Number: _____

SIGNATURE OF LICENSEE (QUALIFIER)

***** ATTACH A COPY OF YOUR UPDATED LICENSE TO THIS APPLICATION. *****

I, _____, a Notary Public for _____ County and the State of North Carolina do hereby certify that _____, personally appeared before me this date and acknowledged the due execution of the foregoing instrument. Witness my hand and official seal, this the _____ day of _____, 20_____.

Notary Public Signature _____

(SEAL)

My Commission Expires _____

Please list the bonafide employees' name that you desire to allow to purchase the aforementioned permit under your license number. The licensee is liable for all work performed under the license number listed above and by the permit issued by this office.

Bonafide Employees' Name (Please Print) _____