

# CITY OF DEFUNIAK SPRINGS

Permit No. \_\_\_\_\_

## ELECTRICAL PERMIT

PO BOX 685; DEFUNIAK SPRINGS FL 32435

TELEPHONE: 850-892-8571

JOB ADDRESS			
OWNER NAME		TELEPHONE NUMBER	
CONTRACTOR NAME		CONTACT NUMBER	

**USE OF BUILDING**

Single Family 
 Multiple Family 
 Mobile Home 
 Commercial 
 Accessory Bldg

**CLASS OF WORK**

New 
 Addition 
 Alteration 
 Repair

DESCRIPTION OF WORK TO BE PERFORMED \_\_\_\_\_

SPECIAL CONDITIONS \_\_\_\_\_

		PERMIT FEES			
		NO	EACH	FEE	
APPLICATION ACCEPTED BY	PLANS CHECKED BY	<b>COMMERCIAL</b>			
<p><b>APPROVED FOR ISSUANCE BY</b></p> <hr/> <p style="text-align: center;"><b>NOTICE</b></p> <p>THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 (SIX) MONTHS OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.</p> <p>I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS AND LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT, THE GRANTING 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.</p>		Main Service Size _____ AMP			
		Additional Circuits	up to 60 amp		
			61-200 amp		
			201-800 amp		
			801 amp and up		
		Temporary Service	Underground Pole		
		Burglar/Fire Alarm System			
		Valuation Amount	\$ _____		
		Service	CONNECT / RECONNECT		
		Pools & Spas			
	Other	_____			
		<b>RESIDENTIAL</b>	NO	EACH	
		Main Service Size _____ AMP			
		Total Dwelling Size _____ Sq. Ft.			
		Temporary Service	Underground	Pole	
		Burglar/Fire Alarm System			
		Valuation Amount	\$ _____		
		Service	CONNECT / RECONNECT		
		Pools & Spas			
		Mobile Home			
		Other			
		BASE FEE			
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT	DATE	TOTAL PERMIT FEE			
SIGNATURE OF OWNER (IF OWNER BUILDER)	DATE				