Barnwell County
Building Department

ELECTRICAL PERMIT

3

Jurisdiction of _____

OWNER | JOB ADDRESS

Applicant to complete numbered spaces only.

JOB ADDRESS

1	LEGAL DESCR	LOT NUMBER	BLK	TRACT	(☐ SEE ATTACHED SHEET)
2	OWNER		MAIL ADDRESS	ZIP	PHONE
3	CONTRACTOR		MAIL ADDRESS	PHONE	REGISTRATION NO
4	ARCHITECT OR DESIGNER		MAIL ADDRESS	PHONE	REGISTRATION NO
5	ENGINEER		MAIL ADDRESS	PHONE	REGISTRATION NO
6	LENDER		MAIL ADDRESS		BRANCH
7	USE OF BUILDING				

8 Class of work: ☐ NEW ☐ ADDITION ☐ ALTERATION ☐ REPAIR

9 Describe work:

SPECIAL CONDITIONS:

APPLICATION ACCEPTED BY:	PLANS CHECKED BY:	APPROVED FOR ISSUANCE BY:

NOTICE

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS 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 ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH 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 OWNER BUILDER (DATE)

PERMIT FEES

		No.	Each	Fee
RECEPTACLE	Total Outlets			
LIGHT				
SWITCH				
LIGHTING FIXTURES	Total Fixtures			
RANGES CLO. DRYER WTR. HTR.				
GABAGE DISP. STA. COOK TOP				
DISH WASH. CLOTHES WASH.				
SPACE HTR. STA. APPL. 1/2 H.P. MAX.				
MOTORS:	H.P.			
SIGNS	NO. TRANS.			
	NO. LAMPS			
TEMP POWER ☐ POLE ☐ UNDGD.				
SEVICE ☐ NEW ☐ CHANGE	0-200A			
	201-400A			
	401-600A			
	OVER 600A			
PERMIT ISSUING FEE			$	
TOTAL FEE				$

WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT

PLAN CHECK VALIDATION CK. M.O. CASH PERMIT VALIDATION CK. M.O. CASH

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