

JOB ADDRESS: _____

PERMIT # _____

NEW ALTERATION ADDITION OTHER

APPLICATION FOR ELECTRIC WIRING PERMIT
CITY OF ALLIANCE
504 E. Main St., Alliance, OH 44601
Phone 330-823-5122

DATE _____

ESTIMATED VALUE _____

APPLICATION FEE: \$ _____

OWNER _____

PERMIT FEE - NEW CONSTRUCTION/ADDITIONS

ADDRESS _____

_____ sqft x _____ ¢ \$ _____

CITY & ZIP _____ **PHONE** _____

• Temporary Service \$ _____

EMAIL _____ **CELL** _____

• Permanent Service \$ _____

PERMIT FEE - ALTERATIONS \$ _____

CONTRACTOR _____

PERMIT FEE - SERVICE UPGRADE \$ _____

ADDRESS _____

• OH Edison DR # _____

CITY & ZIP _____ **PHONE** _____

PERMIT FEE - MISCELLANEOUS

EMAIL _____ **CELL** _____

• Electric Water Heaters \$ _____

• Generators \$ _____

• Solar Panels \$ _____

• Swimming Pools \$ _____

PERMIT FEE - SPECIAL INSPECTION \$ _____

I hereby verify the truth and accuracy of this application.

Signature _____ Date _____

CASH Subtotal \$ _____

OWNER

CONTRACTOR

AGENT

CK # _____ 1% State Fee \$ _____

SPECIAL INSTRUCTIONS, COMMENTS, CONTINGENCIES

TOTAL: \$ _____