



**ELECTRICAL SUBCODE  
TECHNICAL SECTION**

**A. IDENTIFICATION—APPLICANT:** COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block \_\_\_\_\_ Lot \_\_\_\_\_ Qualification Code \_\_\_\_\_  
Work Site Location \_\_\_\_\_

Owner in Fee: \_\_\_\_\_

Tel. (\_\_\_\_) \_\_\_\_\_ e-mail \_\_\_\_\_

Address \_\_\_\_\_ street \_\_\_\_\_ zip code \_\_\_\_\_

Contractor: \_\_\_\_\_ Tel. (\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ e-mail \_\_\_\_\_

Contractor License No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): \_\_\_\_\_

Federal Emp. ID No. \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_

**B. ELECTRICAL CHARACTERISTICS**

Use Group Present \_\_\_\_\_ Proposed \_\_\_\_\_

[ ] Pole/Pad # \_\_\_\_\_ [ ] Temporary [ ] Other \_\_\_\_\_

Building Occupied as \_\_\_\_\_ Utility Co. \_\_\_\_\_

Est. Cost of Elec. Work \$ \_\_\_\_\_

**JOB SUMMARY (Office Use Only)**

**PLAN REVIEW**

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: \_\_\_\_\_ Approved by: \_\_\_\_\_

[ ] Electric Plans Approved

Date: \_\_\_\_\_ Approved by: \_\_\_\_\_

Joint Plan Review Required:

[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

**SUBCODE APPROVAL for PERMIT**

Date: \_\_\_\_\_

Approved by: \_\_\_\_\_

**SUBCODE APPROVAL for CERTIFICATE**

[ ] CO [ ] CCO [ ] CA

Date: \_\_\_\_\_

Approved by: \_\_\_\_\_

**INSPECTIONS**

Type: \_\_\_\_\_

Rough \_\_\_\_\_

Barrier-Free \_\_\_\_\_

Trench \_\_\_\_\_

Temp. Serv. \_\_\_\_\_

Constr. Serv. \_\_\_\_\_

TCO \_\_\_\_\_

Other \_\_\_\_\_

Service \_\_\_\_\_

Final \_\_\_\_\_

Barrier-Free \_\_\_\_\_

Temp. Cut-in-Card Date Issued \_\_\_\_\_

Final Cut-in-Card Date Issued \_\_\_\_\_

Annual Pool Inspection \_\_\_\_\_

Date of Grounding and Bonding \_\_\_\_\_

Certification \_\_\_\_\_

**DATES**

Failure \_\_\_\_\_

Approval \_\_\_\_\_

Initial \_\_\_\_\_

Date Received \_\_\_\_\_  
Control # \_\_\_\_\_  
Date Issued \_\_\_\_\_  
Permit # \_\_\_\_\_

**C. CERTIFICATION IN LIEU OF OATH**

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant sign/Contractor sign and seal here: \_\_\_\_\_

Print name here: \_\_\_\_\_

[ ] Licensed Electrical Contractor

[ ] Exempt Applicant

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK:

QTY. SIZE ITEMS  
Lighting Fixtures  
Receptacles  
Switches  
Detectors  
Light Poles  
Motors—Fract. HP  
Emergency & Exit Lights  
Communications Points  
Alarm Devices/F.A.C. Panel

**TOTAL NUMBERS**

Pool Permit/with UW Lights  
Storable Pool/Spa/Hot Tub  
KW Elec. Range/Receptacle  
KW Oven/Surface Unit  
KW Elec. Water Heater  
KW Elec. Dryer/Receptacle  
KW Dishwasher  
HP Garbage Disposal  
KW Central A/C Unit  
HP/KW Space Heater/Air Handler  
KW Baseboard Heat  
HP Motors 1/+ HP  
KW Transformer/Generator  
AMP Service  
AMP Subpanels  
AMP Motor Control Center  
KW Elec. Sign/Outline Light

\$ \_\_\_\_\_

Administrative Surcharge \$ \_\_\_\_\_  
Minimum Fee \$ \_\_\_\_\_  
State Permit Surcharge Fee \$ \_\_\_\_\_  
TOTAL FEE \$ \_\_\_\_\_