



# 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 \_\_\_\_\_ Municipality \_\_\_\_\_ Zip code \_\_\_\_\_

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

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

Dates (Month/Day)

Type: \_\_\_\_\_ Failure \_\_\_\_\_ Approval \_\_\_\_\_ Initial \_\_\_\_\_

[ ] 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: \_\_\_\_\_

## 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 Elec. Contractor [ ] Certifd Landscape Irrigation Contr [ ] Exempt Applicant

## D. TECHNICAL SITE DATA

### DESCRIPTION OF WORK:

QTY. SIZE ITEMS FEE (Office Use Only)

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors—Frac. 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 \$ \_\_\_\_\_