



City of Auburndale

Permit#: _____

Electrical Permit Application

Site Address:		Parcel#:	
Permit Type	Electrical Permit	Low Voltage	Zoning Class:

Structure Use	Residential	Commercial	Mobile Home	Other	# of Units:
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Business Name:

Property Owner Name:	Email:
Full Address:	Phone:

COA Contractor #:	Qualifier Name:
Qualifier Phone:	Qualifier Email:

Description of Work:	
	Contract Amount (\$):

Electric Service	New	Replacement	Addition	# of Services:
Power Release Needed	Yes	No	New Meter	Yes No
How Many Meters:	Amperage:		Voltage:	

Low Voltage Systems	Telephone	Nurse Call	Gate Controls	Data
Energy Management	Pool Alarm	HVAC Controls	Central Vacuum	
Fiber	Landscape Lighting	Remote Controls	Light Control System	
Audio	Point of Sale	Alarms	Other:	

Application is hereby made for an electrical permit to do the work as briefly described above and in consideration of issuance of such permit. I agree that the application is subject to being built as referenced to the applicable approved plans and in accordance with all zoning ordinances, building codes, the National Electric Code, and any other ordinances of the City of Auburndale and the laws of the State of Florida applicable thereto. It is understood that any deviation from the information contained herein, unless approved by the building inspector, will render the permit null and void. I also agree that this property will not be occupied or used until all alterations to either public or private property has been completed satisfactorily. A Letter of Completion is required prior to occupancy upon satisfactory completion of all applicable inspections.

Additional documents may include Checklists and Pre-Power Release Form. See www.auburndalefl.com

I hereby certify that the information set forth above is true and correct and that I am the owner of the property or lessee or acting as the agent of either and have been authorized by them to make this application.

Applicant Name:	Company:
Signature:	Date:
Email:	Phone: