Electrical Permit Application:



Commercial,	Multi-Family	&	Industrial
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JOB SITE LOCATION Site Address: Suite #:											
TYPE OF WORK Alteration New Annual Permit Permit of Record Lighting Alteration Replacement											
Maintenance/Repair Master or Meter Inspection of Existing Installation											
If adding or replacing any Lighting: WSEC compliance forms are required. <u>http://waenergycodes.com</u>											
JOB VALUATION \$ PROJECT NAME											
DESCRIPTION OF WORK											
NEW C	OR ALTERED SERVICE	TEMPORARY SERVICE		E ADDIT	ADDITIONAL FEEDERS		BRANCH CIRCUITS ONLY				
Quantity		Quantity			Quantity			First 5 per branch circuit panel			
	0 – 100 amps		0 – 20	0 amps		0 – 200 amps		Additional circuits			
	101 — 200 amps		201 –	400 am	ps	201 – 600 amps		LOW VOLTAGE/TELECOM			
	201 – 400 amps		401 –	600 am	ps	601 — 1000 amps		First 2,500 sf or less			
	401 – 600 amps		601 aı	1 amp + 100		1001 amps +		Each additional 2,500 sf or portion thereof			
	601 — 800 amps		Additio	nal	G	ENERATOR		SIGNS & OUTSIDE LIGHTING			
	801 – 1000					Installed transfer for		First sign (No service included)			
	1000 amps +					portable generato	S	Each additional sign (inspected same time)			
ANNUAL PERMIT FOR COMMERCIAL & INDUSTRIAL LOCATIONS											
	1-3 plant mechanical tech (max 6 inspe	ctions)	1	-3 plant mechar	ical tech (max 12 insp	ch (max 12 inspections) 4-6 plant mechanical tech (max 24 inspections)				
7-12 plant mechanical tech (max 36 inspections) 13-35 plant mechanical tech (max						nanical tech (max 52 ir	spections)	25+ plant mechanical tech (max 75 inspections)			
A maximum of two inspections are provided per permit. Additional inspections will be subject to trip fee assessment.											
ELECTRICAL CONTRACTOR PROPERTY OWNER							OWNER				
Business Name: Name:					Name:						
Addre	ss City/State/Zip:					Address City	Address City/State/Zip:				
Phone:					Phone:	Phone:					
Email:				Email:	Email:						
WA St	WA State License #:										
ELECTRONIC PLANS SUBMITTER (responsible for ePlans uploading & correspondence)											
Name: Phone:											
Address/City/State/Zip:					Email (require	Email (required):					
ONLINE PAYMENT											
Existing ePermits User Name: Request an ePermits Account											
REQUIRED SIGNATURES											
A complete application form, submittal documents and required information as set forth in VMC 17.08.100 must be submitted to obtain a permit. If it is determined that the application is not complete and/or the application fees have not been paid, the City may reject the application and plan review will not begin. It is the responsibility of the applicant/owner to comply with all private conditions, covenants and restrictions (CC&R's) associated with this property. As evidenced by my signature below, I/we agree that City of Vancouver staff has my/our full permission to enter upon the subject property at any reasonable time to consider the merits of the application, to take photographs and to post public notices.											
Applicant Signature:								Date:			
Property Owner Signature:								Date:			

Property Owner to perform work