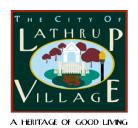
## **APPLICATION FOR ELECTRICAL PERMIT**



Permit#	E

**Date:** / /

## **Inspection Information**

Inspections can be scheduled for Tuesdays and Thursdays, 9 a.m.— noon.

Building Dept.: 248-557-2600 ext. 237 Fax: 248-557-2602 Email: building@lathrupvillage.org

Job Location:			Build	Building Permit #:		
Property Owner:			Phone	Phone #:		
This application when properly	signed g	grants permis	sion to:			
Contractor Name:						
Address:			City:	City:		
Zip:		Phone #: Email.:				
To Install Electrical Equipment	as Liste	d Below, at A	Above Location			
Item	No.	Fee	Item	No.	Fee	
Appliances		\$20	Swimming Pool		\$40	
Circuits Open/Concealed		\$10 ea.	Feeder		\$50	
Fixtures/Lamps		\$25	New/Temp. Service		\$40	
Motors			Change of Service		\$40	
Generator		\$80	Swimming Pool		\$50	
Furnace Wiring		\$30	Sign		\$40	
Air Conditioner		\$25	Licenses Registration		\$25	
Space Heater		\$40	Inspection Each		\$40	
Ready for inspection? Yes \( \Bar{\sigma} \) No \( \Bar{\sigma} \)						
		Begins 50% perm	t Cancellation Refund iit fee returned After Work Begins 0 permit fee retu			
Public Act 135 of 1989 mandates the follo	owing infor	mation for all re	sidential permits. Only State of Michigan issued	licenses will be acce	pted.	
Applicant License No.: Expiration Date:						
Worker's Disability Compensation	Insuranc	e Carrier or R	eason Exemption:			
Internal Revenue Code Employer	ID# or Ex	emption Reaso	on:			
Michigan Employment Security C	omm. Em	ployer # or Ex	xemption Reason:			
	the licensin	g requirements	of Public Acts of 1972, being section 125.1523a of this state relating to persons who perform wo			
Applicant's Signature: Date:						