



**TOWN OF CAPE CHARLES
APPLICATION FOR ELECTRICAL PERMIT**

Date _____

Building Permit Number: _____
(IF APPLICABLE)

A permit is hereby requested to install the following electrical work at:
Street Address: _____

Owner/Occupant Name: _____ Lot #/Suite #: _____

Owner Phone #: _____ Builder: _____

Building: _____ New _____ Existing _____ Addition _____ Moved
Building Type: _____ Residential _____ Commercial

Please check off items to be done below:

Temporary Pole	Amps _____	Trailer Repair	
Trailer Service	Amps _____	Service Entrance Cable	
New Service 1 Phase	Amps _____	Transfer Switch	
New Service 3 Phase	Amps _____	Panel Replacement	
House Meter 1 Phase	Amps _____	Meter Replacement	
House Meter 3 Phase	Amps _____	Overhead to Underground	
Boat Slip	Amps _____	Underground to Overhead	
Traffic Signal	Amps _____	Rough in Under Shell	
Portable Classroom	Amps _____	Fault current Information	
Permanent Temp Pole	Amps _____	Generator Circuit	
Multiple Units		Subfed Panel	
Pool Bonding		Seasonal Pool	
Base Board Heat		Panel Addition	
		Duct Bank	
		Conduit	

Reconnect required: Commercial _____ Residential _____

Wiring: Indicate the **number** and **size** on circuits being installed, repaired or extended:

0-30 amp circuit _____ 31-60 amp circuit _____
61-100 amp circuit _____ 101-200 amp circuit _____
Over 200 amp circuit _____ (indicate size) _____

Additional Information: _____

Applicant's Company Name: _____

State Registration # (Class A, B or C): _____

(Certified Master Tradesman) Signature: _____

Print Name: _____ Contract Value \$ _____ Fee \$ _____

APPROVED BY: _____

I understand this permit is granted only for the work shown and described in this application. Any falsification, misrepresentation or misleading information given VOIDS this permit.