

CITY OF IRONTON APPLICATION FOR ELECTRICAL BUILDING PERMIT

App. Date	Type Permit:	☐ Tempora	ry Service		New Se	rvice				Is Ov	ner A	pplica	ant?
		☐ Expande	d Service		Repair						'es		No
		1. PR	OPERTY	INFC	RMA	TION							
Street Address				Apt		Zip		Parcel N	lumbe	r	Z	oning	9
Cook distintan			Lat Niveshan										
Subdivision			Lot Number		Parce Type			ential (R) ercial (C)		Indust Other			
					71		Comm	erciai (C)		Other	(0)		
		2. O	WNER IN	IFOR	MAT	ION							
First Name	Last N	ame or Busines	s Name							Phon	e		
Street Address					City						State	Zij)
		3. CONT	RACTOR	S INI	FORM	MATIC	N						
	NAME	OF CONTRACT	ΓOR	s	TREET	ADDRES	SS	CITY	, ST.	1	ICEN	SE N	Ю.
Applicant													
Architect/Engineer													
General Contractor													
Excavation													
Concrete													
Carpentry													
Electrical													

City of Ironton Public Service Department

Inspection Hours: Monday – Friday 7:30am – 3:00pm

James Bishop (740) 550-6450

Code Enforcement - Electrician (740) 532-3121



4. BUILDING PERMIT APPLICATION

For Dept. Use Only Plan Number	PROPOSED USE:	INSTITUTIONAL ☐ GROUP HOME ☐ HOSPITAL	☐ OTHER PARKING GARAGE CARPORT			
IMPROVEMENT TYPE: NEW CONSTRUCTION (1) ADDITION (2) ALTERATION (3) REPAIR/ REPLACEMENT (4) DEMOLITION (5)	ASSEMBLY THEATRE NIGHT CLUB RESTAURANT CHURCH OTHER ASSEMBLY BUSINESS EDUCATIONAL (GRADES 1-12)	JAIL MERCANTILE RESIDENTIAL HOTEL, MOTEL MULTI-FAMILY BOCA TWO FAMILY CABO TWO FAMILY BOCA ONE FAMILY CABO ONE FAMILY	MOTOR FUEL SERVICE REPAIR GARAGE PUBLIC UTILITY			
□ RELOCATION (6) □ FOUNDATION ONLY (7) □ CHANGE OF USE ONLY (8)	FACTORY MODERATE HAZARD LOW HAZARD HIGH HAZARD	STORAGE MODERATE HAZARD LOW HAZARD				
Structural (Check all that apply) Frame □ Steel □ Concrete □ Masonry □ Wood	Other, Identify:	Exterior (Check all that apply) Walls Steel Concrete Masonry Wood	Other, Identify:			

5. ELECTRICAL PERMIT APPLICATION

То	tal Service	AMPS	Number of	f Circu	iits:	2 WIRE _	3 W	IRE	4 WIRE	Number of Service of	utlets:_	110V _	_220 V
	POWER DEVICES #		#	OUTPUT/LOAD			POWER DEVICES			OUTPUT/LOAD			
1								7					
2								8					
3								9					
4													
5													
6								То	tal Number of Mo	tors			
Utility Service Revisions:													
Florida di Mode													
Es	st. Start Date:			ı	Est. Fir	nish Date:				Electrical Work Est. Value \$			

NOTICE: Service must be approved prior to utility connection. Contact Building and Zoning Office by phone at (740) 532-0198 for inspection.

6. CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of the City of Ironton. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

X		
SIGNATURE OF APPLICANT	ADDRESS	PHONE NO.
X		
RESPONSIBLE PERSON IN CHARG	PHONE NO	