



## Electrical Permit

City of Rincon, Georgia

Planning and Development Services

Phone: (912) 826-5996 / Fax: (912) 826-2083

www.cityofrincon.com

**Applicant to complete all that apply.**

**Date:** \_\_\_\_\_

**1. Job Address**

**2. Parcel and Lot #**

**3. Owner**

**Mailing Address**

**Phone**

**Email Address**

**4. Electrical Contractor**

**Mailing Address**

**Phone**

**Email Address**

**5. Type of work:** ☐ New ☐ Addition ☐ Renovation ☐ Repair

**6. Describe Work:**

**Project Square footage:** \_\_\_\_\_ **Total Valuation of project:** \_\_\_\_\_

### **Required:**

- Copy of electrician's **TRADE** license.
- Copy of electrician's **BUSINESS** license.
- Copy of building layout, if applicable.
- Electrician **AND** the Homeowner / Owner **MUST** sign this application.

### **NOTICE**

**THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 12 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.**

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not, the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

**Certified Electrician Signature:** \_\_\_\_\_

**Home Owner / Owner Signature:** \_\_\_\_\_

**Approved By:** \_\_\_\_\_ **Date Approved:** \_\_\_\_\_

Planning and Development Inspector