# ST. J@HN'S

## **APPLICATION FOR ELECTRICAL PERMIT**

Internal Use Only					SECTION 1	
Application Number _						
Date Received		Pa				
Project Information					SECTION 2	
Civic Address						
Subdivision Name				Lot #		
Project Value Estimate (Materials & Labour) (\$)						
Purpose of Application	n				SECTION 3	
Type of Building:	Residential	Commercial	Industrial	Institutional	(Government)	
Type of Work:	New Construction	on Addition	Alteration	/Renovation	Repair	
Service Rating:	Volts	Amperes	·	Phase		
Description of Propos	ed Work:					

PERS – Application for Electrical Pe	Planning, Engineering & Regulatory Services			
Applicant Contact Information				SECTION 4
Contractor Name		Trade Nan	ne	
Address		Postal Code		
Phone: (Work)	(Cell)			
Email Address				
Owner Contact Information				SECTION 5
Name		_		
Address		_ Postal Code		
Phone: (Home)	_ (Work)		(Cell)_	
Email Address		_		
Note: Name of property owner mus				

#### **PERS – Application for Electrical Permit**

Planning, Engineering & Regulatory Services

**Applicant Signature of Agreement** 

**SECTION 6** 

I hereby submit this application and confirm that the information supplied is, to the best of my knowledge, correct. I agree to comply with all City Regulations & By-Laws, agree to develop in accordance with the plans approved by the City of St. John's and not to commence development without applicable written approval and permits from the City of St. John's. In addition, I acknowledge that I have reviewed this application and agree to provide any additional information requested and to pay all applicable fees as noted on the City's fee schedule (<a href="www.stjohns.ca">www.stjohns.ca</a>). To view these fees, please click on the link below that pertains to your application:

#### Inspection Services Fees and Rates

Note. Where the applicant and property owner are not the same, the signature of the property	
owner is required before the application can be accepted for processing.	

Applicant Signature	Date (yyyy-mm-dd)
Property Owner Signature	_Date (yyyy-mm-dd)
Staff Signature	Date (yyyy-mm-dd)

### Privacy Statement SECTION 7

Collection of Personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to process your Electrical Permit Application. Questions about the collection and use of the information may be directed to the Manager of the Regulatory Services Division, by email: building@stjohns.ca or by phone 709-576-8565.

Inspection Services
3rd Floor - Annex

Please submit completed form to: 10 New Gower Street

P.O. Box 908

St. John's, NL A1C 5M2

Email: <a href="mailto:permits@stjohns.ca">permits@stjohns.ca</a>
Fax: 709-576-8160

Call: 709-576-8565

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