TOWN OF ORANGE PARK
APPLICATION FOR ELECTRICAL PERMIT
2042 PARK AVENUE
ORANGE PARK, FL 32073
(904) 264-2635

PERMIT # _____
DATE_____

**** APPLICANT MUST COMPLETE ALL ITEMS IN SECTION I, II, III, AND IV ****

I. LOCATION OF BUILDING Street Address _____
Building Permit No. _____

II. CHARACTERISTICS OF PROPOSED ELECTRICAL WORK – ALL APPLICANTS COMPLETE A & B

A. Use of Building

Residential
- ( ) One Family
- ( ) Two or More Families
  Enter number of units_____
- ( ) Transient, Hotel, Motel, Rooming House
  Enter number of units_____
- ( ) Other Residential_____
  _____

Non-Residential
- ( ) Amusement, Recreational
- ( ) Church, Other Religions
- ( ) Industrial
- ( ) Garage, Service Station
- ( ) Office, Bank, Professional
- ( ) School, Library, Educational
- ( ) Store, Mercantile
- ( ) Other _____

B. Nature of Work
- ( ) New Building
- ( ) Existing Building
- ( ) Rewire
- ( ) Addition
- ( ) New Service
- ( ) Increase Service
- ( ) Repair
- ( ) Sign

ELECTRICITY PROVIDED BY Jacksonville Electric Authority

III. ELECTRICAL WORK TO BE DONE **PERMIT FEE**

New Service: Conductor Size_____ Amps_____ Copper ( ) Aluminum ( ) .... _____
Switch or Breaker____ Amps___ PH____ W____ Volt____ Raceway..... _____
Existing Service Size: _____ Amps____ PH____ W____ Volt___ Raceway ..... _____
Feeders: No.____ Size_____ No.____ Size_____ No.____ Size_____..... _____
Lighting Outlets No. _____ Concealed_____ Open_____ Total_____ ..... _____
Receptacles: 0-20 Amps ____ 21-50 Amps ____ 51-100 Amps ____ Over 100 Amps ____ _____
Switches: 0-30 Amps _____ 31-100 Amps _____ ..... _____
Lighting Fixtures: Incandescent _____ Fluorescent & M.V. _____..... _____
Fixed Appliances: 0-60 Amps _____ 61-100 Amps _____ Over 100 Amps _____ ... _____
Transformers: _____. ..... _____

Air Conditioning:

Number	Comp. Motor HP Rating	Other Motors HP Rating	Amp	Ceiling Heat	Heating Kilowatts	
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Motors or Generators: (0-1 HP) **(Over 1 HP)**

Number	Voltage	HP/KW	Number	Voltage	HP/KW	
_____	____	_____	____	____	____	_____
_____	____	_____	____	____	____	_____

Transformers: **(Under 600 Volts)** Number _____ KVA _____ **(Over 600 Volts)** Number ____KVA _____

Signs:

Neon Transformers: Number_____ Motor Size_____ Switch_____ Flasher_____..... _____
Incandescent Lampholers: Number _____ ..... _____
Miscellaneous _____..... _____
TOTAL FEE _____

IV. IDENTIFICATION – To be completed by all applicants:

In consideration of permit given for doing the work as described in the above statement we hereby agree to perform said work in accordance with the Town of Orange Park Ordinances and standards of good practice listed therein.

Name of Certified Electrical Contractor _____ Telephone No._____
Signature of Master Electrician _____ Master Certification No._____
Name of Owner or General Contractor for whom this work is to be done:_____
Name of Homeowner: _____

Rev12/05