

City of Berkeley Lake 4040 S. Berkeley Lake Rd, Berkeley Lake, GA 30096 (770) 368-9484 Fax (770) 368-8810 berkeleylake.com inspector@berkeleylake.com

## **Application for Electric Permit**

$\Box$ New Installation $\Box$ Re	eplacement 🗌 Repair	□ Residential □ Comm	
Address of job			
Owner Name		Phone	
Cell Phone	none Email		
Contractor Name		Cell	
State Card Number	Classification	Exp. Date	
Occupation Tax certificate no.	Issued by	Exp. Date	
Business license #)			
Business license #)	nte card, occupational tax certifica	te and photo ID with this form.	
Business license #) Provide a copy of your current sta	ate card, occupational tax certifica		
Business license #) Provide a copy of your current sta Company Name		Phone	
Business license #) Provide a copy of your current sta Company Name Address		Phone Fax	
Business license #) Provide a copy of your current sta Company Name Address		Phone Fax Email	
Business license #) Provide a copy of your current sta Company Name Address City/State/Zip Work to be performed: (Check a Water heater	all that apply and include number	Phone Fax Email r of each) Flood lights	
Business license #) Provide a copy of your current sta Company Name Address City/State/Zip Work to be performed: (Check a Water heater Washer/Dryer	all that apply and include number Attic fan Air conditioner	Phone Fax Email r of each) Flood lights Meter loops	
Business license #) Provide a copy of your current sta Company Name Address City/State/Zip Work to be performed: (Check a Water heater Washer/Dryer Dishwasher	all that apply and include number Attic fan Air conditioner Outlets	Phone         Fax         Email         r of each)         Flood lights         Meter loops         Showcase	
Business license #) Provide a copy of your current sta Company Name Address City/State/Zip Vork to be performed: (Check a	All that apply and include number Attic fan Air conditioner Outlets Alarm system	Phone         Fax         Email         r of each)         Flood lights         Meter loops         Showcase         Motors	
Business license #) Provide a copy of your current sta Company Name Address City/State/Zip Vork to be performed: (Check a	Attic fan Attic fan Air conditioner Outlets Alarm system Irrigation system	Phone Fax Email r of each) Flood lights Meter loops Showcase Motors Sign	
Business license #) Provide a copy of your current sta Company Name Address City/State/Zip Work to be performed: (Check a Water heater Washer/Dryer Dishwasher Disposal	All that apply and include number Attic fan Air conditioner Outlets Alarm system	Phone         Fax         Email         r of each)         Flood lights         Meter loops         Showcase         Motors	

In filing this affidavit, I hereby certify that I am experienced in the classification above and am either familiar with or will become familiar with all the requirements and will abide by all the rules and regulations set forth by the City of Berkeley Lake. A permit shall be secured prior to the commencement of any tear out work. Upon completion I will call 770.368.9484 or email **inspector@berkeley-lake.com** to arrange for inspection. I certify that all of the above statements are true and that all work performed shall meet national, state and local code requirements. Paid permit application shall serve as City of Berkeley Lake Electric permit.

Applicant's signature	Print name	Date	
For City Use			
Permit #E	Check #	Account 100.32.2000	
Issued by	Date/	Permit \$	