

Address of Job:

## City of Johnson Electrical Permit Application

PO Box 563 · 2904 Main Drive Johnson, Arkansas 72741 Phone: (479) 521-7291 FAX: (479) 521-7292

Permit Number:	

NOTE 1: ALL APPLICATIONS MUST BE COMPLETELY FILLED OUT IN BLUE OR BLACK INK.

NOTE 2: A COPY OF THE DRIVERS LICENSE WILL BE TAKEN OF THE PERSON WHO SUBMITS THE APPLICATION TO THE CITY (THIS INFORMATION IS NEVER INCLUDED IN FOIA REQUEST).

Lot #: Block	c #: Subdivision	n:
Owners Name:		
Owners Address:		
Contractors Name:		
Contractors Address:		
Contractors Phone(s):		
Contractors License #:		Expires:
	THIS SY	YSTEM WILL CONSIST OF:
Temporary Service		\$25.00
Single Phase Service(s):	x Amperes	x \$0.25
3 Phase Service(s):	x Amperes x	c \$0.50
Under Slab Rough-In:	x \$25.00	
Repair: Additi	on: Alteration:	(Please Check - Minimum Charge)
		(Minimum \$50.00) TOTAL:
	RUCTION OR WORK IS SUSF	OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 PENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME
ALL INSPECTIONS REQU AND CAN BE SET FOR AN		OTICE. ALL INSPECTION ARE DONE MONDAY THROUGH FRIDAY
APPLICATION AND KNOW APPLICATION. ALL PROV WHETHER SPECIFIED HE	N THE SAME TO BE TRUÉ AN VISIONS OF LAW AND ORDIN EREIN OR NOT. THE GRANTI	O HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS ND CORRECT; AND THAT I HAVE THE AUTHORITY TO MAKE THIS NANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH ING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO HER FEDERAL, STATE OR LOCAL LAW.
Signature:		Date:
		Approvial Date: