



Application for an ELECTRICAL PERMIT

P.O. Drawer 357
201 South Main Street
Graham, NC 27253
(336) 570-6705
Fax (336) 570-6703
www.cityofgraham.com

Location

Street Address: _____

Name of Owner: _____

Building Permit #, if applicable: _____

Total Square Feet of area being wired: _____

- New building Single Family or Duplex
 Existing building Commercial or Multifamily

Type of Electrical Work

Complete all that apply.

- Residential or Commercial Service (_____ Amp)
 Saw Service
 Temporary Service for Construction Site
 Temporary Power per Sec. 10.8 N.C.E.C.
 Low Voltage Wiring
 Security System
 Solar Installation Electric
 Wiring Swimming Pool
 Wiring HVAC
 Mobile Home Park (_____ spaces)
 Billboard (_____ Amp service)
 Sign, other than billboard

Other: _____

Other: _____

Other: _____

Contractor

Contractor: _____

Contact Name: _____

Phone # _____ Lic. # _____

Mailing Address: _____

City, State, Zip: _____

Applicant and Project Contact

Name: _____

- Property Owner Contractor

Other _____

Mailing Address: _____

City, State, Zip: _____

Phone # _____

Email: _____

I hereby agree to begin the work herein specified at once and agree to notify the City of Graham Inspection Department immediately upon completion so a final inspection can be scheduled as required by law.

I agree to conform to all applicable laws and ordinances of the City of Graham and the State of North Carolina and further state that all statements made herein are true.

Signature of Applicant _____

Date _____

Certificate of Occupancy will be required prior to occupying the premises

FOR OFFICE USE ONLY	
Sign Permit #	Remarks:
Fee \$	