



Internal Use Only:
Finance Code: Electrical
Fee: _____
Approved: _____

CITY OF IRVINE

Development Department ~ Building Inspections

101 Chestnut Street, Irvine, Kentucky 40336

Phone 606-723-2554

Fax 606-618-9111

RESIDENTIAL ELECTRICAL PERMIT APPLICATION

ONLY A LICENSED ELECTRICAL CONTRACTOR MAY APPLY FOR AND OBTAIN THIS PERMIT. ALL INFORMATION MUST BE ACCURATE AND LEGIBLE; IN ORDER FOR THIS APPLICATION TO BE CONSIDERED FOR ISSUANCE OF A PERMIT YOU MUST HAVE A CITY OF IRVINE BUSINESS LICENSE, COPY OF INSURANCE, AND PAY THE TOTAL AMOUNT DUE FOR THIS PERMIT.

Site/Building Information

Address of Project:	Lot:	Zone:
Detailed Description of Work:		
Please select the type of work to be completed:		
New Single-Family Construction:		
<input type="checkbox"/> Trip Charge or Reinspection - \$75		
<input type="checkbox"/> 100 AMP Service - \$150	<input type="checkbox"/> 800 AMP Service -\$400	
<input type="checkbox"/> 200 AMP Service - \$175	<input type="checkbox"/> 1000 AMP Service -\$500	
<input type="checkbox"/> 400 AMP Service - \$225	<input type="checkbox"/> 1200 AMP Service -\$600	
<input type="checkbox"/> Multi-Family/Duplex/Apartment: - \$150/unit No. of Units: _____		
<input type="checkbox"/> Room Additions/Swimming Pools/Rewires/Service Panels - \$175		
<input type="checkbox"/> Signs/Pump Stations/Garages/Outbuildings \$125		<input type="checkbox"/> Solar Panel Installation - % of Contract
<input type="checkbox"/> Misc./Temporary Pole/Service off for over a year - \$75		

Applicant Information

Name:	
Address:	
Phone Number (required):	Email (required):
Applicant is: <input type="checkbox"/> Owner <input type="checkbox"/> Contractor	Preferred Contact Method: <input type="checkbox"/> Phone <input type="checkbox"/> Email

Property Owner Information

Name:	Check if same as applicant: <input type="checkbox"/>
Address:	
Phone Number (required):	Email:

Electrical Contractor Information

(Required, if a contractor is completing the work)

Business Name:	
Address:	
Phone Number:	Email:
City of Irvine Business License Number (required):	State Issued License Numbers: ME: _____ CE: _____

Continued on Next Page

Applicant Signature

I hereby apply for an Electrical Permit and acknowledge that the information above is complete and accurate; **I understand that this is not a permit, and the submission of this application does not constitute approval of any work.** I understand that false statements, errors, and/or omissions may be sufficient cause for denial or revocation of the permit. Issued permits become void if work does not begin within 180 days or is suspended at any time for over 180 days. **Application is not valid unless signed.**

Applicant Signature: _____ **Date:** _____

Applicant Printed name: _____

****Payment is required at the time of submission; once all required documents are received.**

Homeowner Affidavit

(Please complete if you are the homeowner and completing the work yourself)

Are you installing a Temporary Service Pole? ☐ Y ☐ N

Estimated Cost: _____

Related Building Permit No. (if applicable): _____

- Homeowner must be qualified to perform electrical connections as required by current NEC 70 Article 550.
- A certified installer sticker must be attached to the sub-panel before electric power can be turned on.

By signing this application, it is understood that I, _____, am the owner of the above-mentioned property and have resided in said property before relocation. I affirm that the home is not currently for sale, and that any and all electrical related work is being done in the above-mentioned home is being completed by me and no one else. I also understand that the work must meet the Kentucky Building Code and the National Electrical Code and I am required to obtain the inspection(s) required from the electrical Inspector to ensure the above requirements have been met. This includes a final inspection. If I am found to have falsified this application in any way, I will face legal action as deemed appropriate.

Homeowner Signature: _____ Date: _____

This section to be completed by licensed Notary:

Subscribed and sworn to before me on this _____ day of _____, 20 _____

Notary Public: _____

My Commission Expires: _____ ID: _____

Notary Seal/Stamp Here: