



City of New Albany, Indiana
Russ Segraves
Building Commissioner

COMMERCIAL ELECTRICAL PERMIT APPLICATION

Name of Business: _____ Date: _____

Work Site Address: _____ Lot / Ste.: _____

Owner's name(s): _____

Contractor Name: _____

Contractor's name and phone on the work site: _____

Estimated cost of project: _____

1. **ELECTRIC:**

New Service and/or up-grade: \$25.00 plus \$ _____

Added Amps _____ x .50 \$ _____

Existing total rewire/rehab jobs
\$25.00 plus Amps _____ X .50 Total: \$ _____

2. **COMMERCIAL TEMPORARY POLE:**

Each permit has a \$50.00 fee. Total: \$ _____

3. **SERVICE / REPAIR WORK:**

Each permit has a \$75.00 fee Total: \$ _____

Grand Total: \$ _____

Description of work

*****REMINDER FOR CONTRACTORS*****

When mailing in applications, please remember to send a self-addressed stamped envelope to receive your copy.

OFFICE USE ONLY

APPROVED BY: _____ **DATE:** _____