

Date Received:



9500 Belmont Avenue · Franklin Park, Illinois 60131 (847) 671-8245, FAX # (847) 671-8790

ELECTRICAL PERMIT APPLICATION

(COMPLETE ALL SHADED AREAS)

DATE OF APPLICATION: _____ PERMIT NUMBER: 26-EP-_____

REAL ESTATE TAX NUMBER: 12- - - -0000 PLANS ATTACHED: ☐ YES ☐ NO

ADDRESS OF PROPERTY: _____

PROP. OWNERS NAME: _____ PHONE NUMBER: _____

PROPERTY OWNER'S ADDRESS: (IF NOT SAME AS ABOVE, _____)

PROPERTY OWNER'S EMAIL ADDRESS: _____

DESCRIPTION OF WORK: _____

WORK TO BE PERFORMED:

☐

COMMERCIAL

☐

INDUSTRIAL

JOB COST: _____

IF RESIDENTIAL,

☐

HOUSE

☐

GARAGE

☐

BOTH

CONTRACTOR INFORMATION

INSTRUCTIONS: ALL CONTRACTORS & SUB-CONTRACTORS MUST BE LICENSED & BONDED WITHIN THE VILLAGE OF FRANKLIN PARK TO PERFORM ANY WORK, INCLUDING REQUIRED LIABILITY INSURANCE & BOND. (A SEPARATE APPLICATION MUST BE FILLED OUT FOR CONTRACTOR LICENSING.) FOR WORK BEING DONE BY CONTRACTOR(S), PLEASE FILL IN THE APPROPRIATE LINES & SUPPLY FOLLOWING INFO (OR SEE BOTTOM OF PAGE FOR PROPERTY OWNER SIGN OFF) PLEASE INCLUDE NAME, ADDRESS AND PHONE NUMBER. IF ADDITIONAL SPACE IS NEEDED ATTACH SEPARATE LIST FOR CONTRACTORS. **CODES: NEC 2020**

ELECTRICAL CONTRACTOR: _____

REGISTERED AT: _____ REG #: _____ EXP DATE: _____

LICENSED CONTRACTORS SIGNATURE: _____ DATE: _____

PRINT NAME: _____ PHONE NUMBER TO CALL WHEN PERMIT IS READY: _____

PLEASE COMPLETE PAGE TWO OF APPLICATION

IMPORTANT ! INSPECTIONS ARE REQUIRED FOR ALL WORK BEING DONE, 24HOUR NOTICE REQUIRED TO SCHEDULE AN INSPECTION.

*** FOR OFFICE USE ONLY ***

ELECTRICAL FEE

PLAN REVIEW FEE

FIRE DEPT. ALARM FEE

ADDITIONAL FEE

TOTAL PERMIT COST: _____



ZONING
STAMP:

DATE & TIME CALLED/PICKUP

ELECTRICAL INSPECTOR INIT. BUILDING DIRECTOR INITIALS



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WORK DESCRIPTION

WIRING		FIXTURES	
SIGN		MAINTENANCE	

LIGHTING CIRCUITS AND OUTLETS

15 AMP CIRCUIT	
20 AMP CIRCUIT	
30 AMP CIRCUIT	
40-50 AMP CIRCUIT	
60-80 AMP CIRCUIT	
OUTLETS ON EXISTING CIRCUITS	

SERVICES / SUBFEEDS / CIRCUITS

	NUMBER		NUMBER
100		1200	
200		1600	
400		2000	
800		4000+ (SPECIFY)	

POWER

	NUMBER	TOTAL H.P.
AIR CONDITIONERS		
APPLIANCES		
MOTORS		

OUTSIDE SIGNS

NO. OF SQ. FT.	NO. OF OPENINGS

SERVICE REVISIONS, OTHER APPARATUS, REPAIRS, ETC.: _____

IF WORK IS TO BE DONE BY THE PROPERTY OWNER:

I FULLY UNDERSTAND WHEN I ACT AS GENERAL CONTRACTOR, ON MY OWN PROPERTY, FOR THIS PROJECT, I ASSUME FULL RESPONSIBILITY FOR ANY VIOLATIONS OF THE VILLAGE OF FRANKLIN PARK CODES AND ORDINANCES AND THOSE LAWS OF THE STATE OF ILLINOIS AND ANY APPLICABLE FEDERAL LAW, AS WELL AS ANY REGULATIONS WHICH ARE DERIVATIVES THEREOF. AS THE HOMEOWNER, I MUST BE APPROVED BY THE ELECTRICAL INSPECTOR OR INSPECTIONAL SERVICES DIRECTOR TO DO SUCH WORK. A LETTER SHALL BE SUBMITTED FROM HOMEOWNER STATING HIS OR HER ELECTRICAL QUALIFICATIONS WILL BE REQUIRED.

IT IS MY RESPONSIBILITY TO HAVE ALL VIOLATIONS CORRECTED BEFORE THE DEPARTMENT OF INSPECTIONAL SERVICES WILL APPROVE THE APPROPRIATE INSPECTIONS. (MAY REQUIRE PLANS FROM A CERTIFIED DESIGN PROFESSIONAL)

OWNER'S PRINTED NAME

OWNER'S SIGNATURE

DATE