



ELECTRICAL PERMIT APPLICATION

City of Hopewell

Division of Code Enforcement

300 N Main St., Hopewell, VA 23860

(804) 541-2226 Fax (804) 541-2318

I understand that all work and materials used in this installation shall conform strictly to the City of Hopewell ordinances and the Virginia Electrical Code and that this permit expire if work is not commenced within six (6) months from the date of issuance. This office requires submittal of plans and specifications on all installations.

Project Description: (Describe Work)

Address of Work: _____
(Location) _____

Class of Work (check one): New _____ Alteration _____

Building Use (check one): Residential _____ Commercial _____
Industrial _____ Other _____

Owner Information:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____

Daytime Phone:(_____) - _____ Cell:(_____) - _____
Email: _____
Contact Person: _____

Contractor Information:

Contractor: _____
Address: _____
City: _____ State: _____ Zip: _____

Email: _____
State License: _____ Expires: _____
City License: _____
Business Phone:(_____) - _____ Cell:(_____) - _____
Contact Person: _____

Mechanics Lien Agent: _____
Address: _____ City: _____ State: _____ Zip: _____

Estimated Cost (Labor and Materials): \$ _____ Minimum Permit Fee: \$25.00 (RESIDENTIAL), plus \$0.04 per square foot, plus current State Surcharge; Minimum Permit Fee: \$100.00 (COMMERCIAL), plus 1% of labor and materials, plus current State Surcharge.

I understand that this is an application for a Electrical Permit and that work may not begin until the official permit has been issued.

I understand with submittal of this application that all work and materials used in this installation shall conform strictly to the 2012 Virginia Electrical Code.

Signature of Applicant: _____ Date: _____

Official Use Only

Permit # _____	Permit Fees \$ _____	Check # _____	Cash _____ CC _____
Sub/Parcel # _____	Lot / Block _____	Zoning _____	Enterprise Zone: YES NO (Circle)
Building Official Approval: _____		Date: _____	
Zoning Official Approval (if required): _____		Date: _____	