



ELECTRICAL PERMIT APPLICATION

ALL WORK MUST HAVE A FINAL INSPECTION

FOR OFFICE USE ONLY

PERMIT FEE: \$ _____ PERMIT # _____

DATE: _____ ENTERED BY: _____

VALUATION OF WORK (ENTIRE JOB INCLUDING LABOR & MATERIALS): \$ _____

ADDRESS / LOCATION: _____ Mount Vernon, Texas

ELECTRICAL CONTRACTOR: _____ Licence # _____

PROPERTY OWNER GENERAL / CONTRACTOR (IF APPLICABLE): _____

WORK DESCRIPTION: _____

RESIDENTIAL

COMMERCIAL

TEMPORARY ELECTRICAL SERVICE

ROOMS QUANTITY: _____

AIR CONDITIONER UNITS QUANTITY: _____

CENTRAL HEATING UNITS QUANTITY: _____

ELECTRIC RANGE QUANTITY: _____

ELECTRIC DRYER QUANTITY: _____

ELECTRIC WATER HEATER QUANTITY: _____

NUMBER OF OPENINGS QUANTITY: _____

METER LOOP SIZE: _____

CHRISTMAS TREE LOT (COMMERCIAL)

Affirmation: I certify that I will contact City Hall upon completion of work for final inspection. By signing this application you are verifying all information is correct and are in compliance with NEC 2017.

SIGNATURE: _____ DATE: _____

PHONE NUMBER: _____ FAX NUMBER: _____

EMAIL: _____

City of Mount Vernon

109 N. Kaufman * P.O. Box 597 * Mount Vernon, TX 75457 * 903 537 2252 * FAX 903 537 2634

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