

Electrical Permit Application
Smyrna Department of Building Safety
315 S Lowry St, Smyrna TN 37167
615-355-5704

Email this form to: permits@townofsmryna.org

A **NON RESIDENTIAL** electric permit is hereby requested for:

Business (Project) Name: _____ Date: ____/____/20____

Business (Project) Address: _____ Project Amount: \$ _____

Scope of Work: _____

(Choose the amperage, then mark the number & type of inspections you need.)

Rough-In Inspection

	<i>Quantity</i>			<i>Total</i>
Any Rough-In Inspection	_____ x	\$50.00	=	\$ _____

Temporary Poles & Service Releases (must indicate if TP or SR)

1-200 Amp	_____ x	\$50.00	=	\$ _____
201-400 Amp	_____ x	\$60.00	=	\$ _____
401-600 Amp	_____ x	\$70.00	=	\$ _____
601-1000 Amp	_____ x	\$100.00	=	\$ _____
>1000 Amp	_____ x	\$350.00	=	\$ _____

Final Inspection (only 1 is allowed per permit)

1-200 Amp	_____ x	\$40.00	=	\$ _____
201-400 Amp	_____ x	\$50.00	=	\$ _____
401-600 Amp	_____ x	\$55.00	=	\$ _____
601-1000 Amp	_____ x	\$100.00	=	\$ _____
>1000 Amp	_____ x	\$400.00	=	\$ _____

Other Inspections

HVAC-R (1 Final inspection)	_____ x	\$50/unit	=	\$ _____
Construction Trailer (RI & Final)	_____ x	\$90.00	=	\$ _____
Sign (1 Final Inspection)	_____ x	\$50.00	=	\$ _____
Miscellaneous _____	_____ x	\$50.00	=	\$ _____

Technology Fee \$20 per permit

GRAND TOTAL:  \$ _____

Contractor Name: _____ License Type: _____ License #: _____

Contractor Address: _____ Contractor City/State/Zip _____

Contractor Phone: _____ Contractor Email: _____

My signature below represents that I am the responsible party for any electrical work done under this permit; and furthermore, I agree to abide by any and all of the Town of Smyrna's adopted codes and ordinances.

Contractor Signature: _____ Date: ____/____/20____
