



County of Pulaski, VA  
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|                                   |
|-----------------------------------|
| VERSION 3-2020<br>OFFICE USE ONLY |
| Permit #: _____                   |
| Permit Fee: \$ _____              |

## Electrical Permit Application

Date: \_\_\_\_\_

**Project Address and/or Tax Map #:** \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Owner's Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email (required): \_\_\_\_\_

Directions: \_\_\_\_\_

**Description of Work:** \_\_\_\_\_

**Value of Construction (Materials and Labor):** \$ \_\_\_\_\_

**Is this property located in the 100-year Floodplain? Yes / NO**

Who is doing the work? (circle one): Contractor Homeowner

**Homeowners doing their own work MUST submit a Homeowners Affidavit**

*Office Use Only - Homeowner Affidavit Submitted? Yes / NO Date received:* \_\_\_\_\_

**Contractor:** \_\_\_\_\_

Contractor Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

**VA State License #:** \_\_\_\_\_ **Pulaski County License #:** \_\_\_\_\_

Main Contact Person: \_\_\_\_\_ Cell: \_\_\_\_\_

Office/Alt Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ **Email:** \_\_\_\_\_

**Circle when applicable: Temporary Electric Permanent Electric**

Plans Submitted: Yes / NO AEP Work Order #: \_\_\_\_\_

Will an electric car charging station be installed? Yes / NO

Application is made herewith for an Electrical Permit on the premise stated above. The applicant hereby agrees that all work will comply with the current VUSB, all state and local regulations and in accordance with approved plans. The applicant further attests that the information provided in the application is true and correct. Applications are processed in the order they are received and, if approved, you will be notified via phone or email. **Inspections require a 24 to 48 hour notice.**

Contractor Signature: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_