



## ELECTRICAL PERMIT PACKET

Please select one of the following options concerning the electrical service to be installed.

Service Size/Voltage	Residential	Commercial	Ag.
<input type="checkbox"/> 120	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 120/240	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 120/208	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 240/480	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 277/408	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 480	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____ List Voltage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please check the use for the electrical service; the maximum amperage is listed next to each option unless otherwise approved by the Building Official/Building Inspector.

RV-60amps \_\_\_\_\_

RV/Well-100 amps \_\_\_\_\_

Please note an annual renewal fee (\$35.00) is required for RV service poles. Notices will be mailed and must be paid on or before: \_\_\_\_\_

Renewal Date

Residential-100 amps (min) \_\_\_\_\_ 200 amps \_\_\_\_\_ Other (list amps) \_\_\_\_\_

Commercial (list amps): \_\_\_\_\_

Agriculture Use: 60 amps \_\_\_\_\_ 100 amps \_\_\_\_\_ \*200 amps \_\_\_\_\_

**\*For any service for agriculture use that exceeds 100 amps, list the use of in the space provided:** \_\_\_\_\_

MADISON COUNTY BUILDING DEPARTMENT  
BUILDING PERMIT APPLICATION

Application Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Project Address: \_\_\_\_\_

Parcel ID#: \_\_\_\_\_

Applicant/Prime Contractor Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_

Contact Person Name: \_\_\_\_\_ E-mail \_\_\_\_\_

DBPR Florida License No.: \_\_\_\_\_ Expiration: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Architect (if applicable): Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

FL. Dept. of Business & Professional Regulation License No.: \_\_\_\_\_

License Holder's Name: \_\_\_\_\_

Engineer (if applicable): Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

FL. Dept. of Business & Professional Regulation License No.: \_\_\_\_\_

License Holder's Name: \_\_\_\_\_

For Addition and New Construction Projects all plans and specifications are required to be sealed by an architect and/or engineer showing seal and signature with license number.

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Two Sets of Plans (2)** | <input type="checkbox"/> Site Plan (2)          | <input type="checkbox"/> Septic/Sewer Permit |
| <input type="checkbox"/> Wind Load Analysis (2)  | <input type="checkbox"/> Zoning Compliance      | <input type="checkbox"/> Driveway Permit     |
| <input type="checkbox"/> Florida Energy Form (2) | <input type="checkbox"/> Notice of Commencement | <input type="checkbox"/> Lease Agreement*    |
| <input type="checkbox"/> Truss Layout (2)        | <input type="checkbox"/> Warranty Deed          | <input type="checkbox"/> Utility Agreement*  |

**\*Commercial Projects Only**

**\*\*For Commercial Projects Submit Four (4) Sets of Plans**

**If indicated provide two (2) copies, one will be returned with building permit noting any required corrections**

**Permit Information:**

Type of Work:  Residential  Commercial

Utility Company:  DUKE  TCEC

Class of Work:  New  Repair  Alteration  Addition  Demolition

Value of Work: \$ \_\_\_\_\_ Sq. Footage: \_\_\_\_\_ Heated Space \_\_\_\_\_ Unheated Space

Scope of Work: \_\_\_\_\_  
 \_\_\_\_\_

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to issuance of a permit and that all work will be performed to meet the standards of all laws regulation construction in this jurisdiction.

**OWNER'S/CONTRACTOR'S AFFIDAVIT:** I Affirm that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws, regulations, construction, and zoning. This statement is made under oath and subject to the penalties for perjury.

**WARNING TO OWNER:** YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

<p>Signature of Owner/Agent _____ Date _____</p>	<p>Signature of Contractor _____ Date _____</p>
<p>Printed Name of Owner/Agent _____</p> <p>STATE OF FLORIDA, COUNTY OF _____</p> <p>SWORN to (or affirmed and subscribed before me this _____ day of _____, 20____, by _____</p> <p>who is personally known to me <input type="checkbox"/> or has produced (type of identification) _____ as identification.</p> <p>Notary Signature: _____</p> <p>My Commission Expires: _____</p> <p>Stamp: _____</p>	<p>Printed Name of Contractor _____</p> <p>STATE OF FLORIDA, COUNTY OF _____</p> <p>SWORN to (or affirmed and subscribed before me this _____ day of _____, 20____, by _____</p> <p>who is personally known to me <input type="checkbox"/> or has produced (type of identification) _____ as identification.</p> <p>Notary Signature: _____</p> <p>My Commission Expires: _____</p> <p>Stamp: _____</p>

**Subcontractor Information:**

**Electrical Subcontractor Name:** \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Mobile: \_\_\_\_\_  
FL. Dept. of Business & Professional Regulation License No.: \_\_\_\_\_  
License Holder's Name: \_\_\_\_\_

**Plumbing Subcontractor Name:** \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Mobile: \_\_\_\_\_  
FL. Dept. of Business & Professional Regulation License No.: \_\_\_\_\_  
License Holder's Name: \_\_\_\_\_

**Mechanical Subcontractor Name:** \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Mobile: \_\_\_\_\_  
FL. Dept. of Business & Professional Regulation License No.: \_\_\_\_\_  
License Holder's Name: \_\_\_\_\_

**Roofing Subcontractor Name:** \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Mobile: \_\_\_\_\_  
FL. Dept. of Business & Professional Regulation License No.: \_\_\_\_\_  
License Holder's Name: \_\_\_\_\_

**Other Subcontractor Name:** \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Mobile: \_\_\_\_\_  
FL. Dept. of Business & Professional Regulation License No.: \_\_\_\_\_  
License Holder's Name: \_\_\_\_\_

**Other Subcontractor Name:** \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Mobile: \_\_\_\_\_  
FL. Dept. of Business & Professional Regulation License No.: \_\_\_\_\_  
License Holder's Name: \_\_\_\_\_

# Board of County Commissioners Madison County, Florida

## COUNTY COMMISSIONERS

- Dist.1 **Ricky Henderson** • 850-973-4663  
565 NE Yellow Pine Ave • Madison FL 32340
- Dist.2 **Clyde King** • 850-948-3702  
582 NW Bailey Grade Rd • Greenville FL 32331
- Dist.3 **Ronnie L. Moore** • 850-948-2043  
6513 NW Lovett Rd • Greenville FL 32331



- Dist.4 **Alfred Martin** • 850-464-1217  
PO Box 264 • Madison FL 32341
- Dist.5 **Roy Ellis** • 850-971-5864  
6156 SE Farm RD • Lee FL 32059

## COUNTY COMMISSIONERS

Madison County is an Equal Opportunity Employer

BOCC ADMINISTRATIVE OFFICES  
Phone 850-973-3179 • Fax 850-973-6880  
madisonbocc@earthlink.net  
www.madisoncountyfl.com

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**MADISON COUNTY BUILDING DEPARTMENT**  
**229 S.W. PINCKNEY STREET • SUITE 219**  
**MADISON, FLORIDA 32340**  
**PHONE (850) 973-6785 • FAX (850) 973-6727**

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## ELECTRICAL DISCLOSURE STATEMENT (489.503-6)

State law requires electrical contracting to be done by licensed electrical contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own electrical contractor even though you do not have a license. You may install electrical wiring for a farm outbuilding or a single-family duplex residence. You may install electrical wiring in a commercial building the aggregate construction costs of which are under \$75,000. The home or building must be for your own use and occupancy. It may not be built for sale or lease. If you sell or lease more than one building you have wired yourself within 1 year after the construction is complete, the law will presume that you built it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person as your electrical contractor. Your construction shall be done according to building codes and zoning regulations. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances.

Property Owner Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Property No: \_\_\_\_\_

I hereby acknowledge that I have read and understand the above statement on this \_\_\_\_\_ day of \_\_\_\_\_, A.D. \_\_\_\_\_.

\_\_\_\_\_  
Owner's Signature