



132 North Elmwood Avenue, Medina, Ohio 44256
Telephone 330-722-9030 Fax 330-764-4385
www.medinaoh.org



ELECTRICAL PERMIT APPLICATION

Permit No. _____ Date Issued _____ Fee _____

*** LOCATION OF PROJECT:** _____

As per this signed application and the approved plans, proposed equipment shall be installed in compliance with all provisions of the Ohio Building Code, Residential Code of Ohio, International Energy Conservation Code, Mechanical Code, and Electrical Code of the City of Medina, Ohio.

The acceptance of this permit shall constitute an agreement on the part of the applicant to abide by the conditions herein contained, and to comply with all the Codified Ordinances of the City of Medina, and the laws of the State of Ohio, relating to the work to be done.

PERMISSION IS GRANTED BY _____
Building Official

APPLICANT TO COMPLETE THIS SECTION

***REQUIRED FIELDS**

*** Owner:** _____ **Phone:** _____

Street: _____ **City:** _____ **State:** _____ **Zip:** _____

*** Contractor:** _____ *** Registration #:** _____ **Phone:** _____

Street: _____ **City:** _____ **State:** _____ **Zip:** _____

Email: _____

***Type of Use:**

Residential Commercial Industrial Describe, if other _____

***Type of Work:**

New Alteration Addition New Service Temp Service Service Change Additional Circuit
 Additional Meters Parking Lot Other

*** Drawings / Specs / Plans Submitted:** Yes No *** Ohio Edison Work Order #(if applicable):** _____

Scope of Work: _____

The owner or agent of the owner of this building and undersigned, do hereby covenant and agree to comply with all laws of the State of Ohio; Codified Ordinances of the City of Medina pertaining to the installation of electrical equipment in accordance with the approved plans, specifications or manufacturers instructions submitted herewith, and certify that the information and statements given on this application, drawing and specifications are to the best of their knowledge, true and correct. Undersigned accepts responsibility for requesting all required inspections in a timely manner.

*** APPLICATION BY** _____ *** DATE** _____
SIGNATURE OF OWNER, CONTRACTOR, OR AUTHORIZED AGENT

*** Printed Name of Applicant** _____