



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** _____

Owner _____ Phone _____

Street _____ City _____ State ____ Zip _____

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

*** REQUIRED INFORMATION**

APPLICANT TO COMPLETE THIS SECTION

* **Owner** _____ Phone _____

Street _____ City _____ State ____ Zip _____

* **Contractor** _____ * **Reg. No.** _____ Phone _____

Street _____ City _____ State ____ Zip _____

Fax _____ E-mail _____

*** TYPE OF BUILDING, STRUCTURE, AREA, OR SPACE WHERE WORK IS TO BE DONE:**

___ RESIDENTIAL ___ COMMERCIAL ___ INDUSTRIAL DESCRIBE IF OTHER _____

* **TYPE OF WORK BEING DONE:** ___ NEW ___ ALTERATION ___ ADDITION ___ OTHER

___ NEW SERVICE ___ TEMP SERVICE ___ SERVICE CHANGE ___ ADD'L CIRCUIT ___ ADD'L METERS ___ FURNACE

___ PARKING LOT * **DRWGS / SPECS / PLANS SUBMITTED** ___ YES ___ NO

BSMT FINISH / MISC / OTHER _____

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 _____