

COUNTY OF UNION  
DEPARTMENT OF BUILDING SAFETY  
1246 S. Duncan By-Pass Suite B  
Union, S.C. 29379  
Phone (864) 424-2341 Fax (864) 427-7851

**ELECTRICAL PERMIT APPLICATION**

TAX PARCEL #: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_

OWNERS NAME: \_\_\_\_\_

PROPERTY TYPE:  RESIDENTIAL  COMMERCIAL  INDUSTRIAL

DESCRIPTION: \_\_\_\_\_

---

NEW  REMODEL  EXISTING  ADDITION

SIZE OF SERVICE

AMPS \_\_\_\_\_ PHASE \_\_\_\_\_ VOLTAGE \_\_\_\_\_

TOTAL ESTIMATED PROJECT COST: \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

COMPANY ADDRESS \_\_\_\_\_

LICENSEE NAME: \_\_\_\_\_ LICENSE # \_\_\_\_\_

I HEREBY CERTIFY: That I have read this application and that all information contained herein is true and correct. That I agree to comply with all County Ordinances and State Laws regulating building construction. That I am the owner or authorized by the owner to perform the herein work described.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_