

PRE-POWER REQUEST

TO: Growth & Resource Management
Permit Center
123 W. Indiana Ave., Room 203
DeLand, Florida 32720-4253

Date _____

Permit No. _____

****ALL FEES MUST BE PAID RELATED TO THIS BUILDING PERMIT****

Building Identification _____

Address _____

The undersigned hereby requests permission to connect the electric current to the above named building for a maximum period of _____ days prior to the final inspections.

Name of Power Co. _____ Start Date: _____ Cut off Date: _____

The reason for this request is as follows: _____

The undersigned also certifies that the wiring, apparatus and fixtures of the entire building are in such condition that electrical current may safely be connected therewith for such period of time and there exists a necessity for this request. The undersigned also understands and agrees that approval of this request does not constitute a waiver of procuring a Certificate of Occupancy prior to any type of occupancy of this building. Should the building be found occupied without a Certificate of Occupancy having been issued, The Volusia County Building Official has the right to have the power disconnected.

Contractor

Contractor's Signature

License Number

STATE OF FLORIDA
COUNTY OF _____

Affirmed and subscribed before me this _____ day of _____ 20____ by _____
who is personally known to me or who has produced _____ (type of ID) as identification.

Signature of Notary Public, State of Florida
Notarial Seal

Print, Type or Stamp Name of Notary

Owner (Fee Simple Titleholder)/Leaseholder (If leaseholder; a lease showing at least 29 years must be attached)

Owner's Signature

STATE OF FLORIDA
COUNTY OF _____

Affirmed and subscribed before me this _____ day of _____ 20____ by _____
who is personally known to me or who has produced _____ (type of ID) as identification.

Signature of Notary Public, State of Florida
Notarial Seal

Print, Type or Stamp Name of Notary

Electrician

Electrician's Signature

License Number

STATE OF FLORIDA
COUNTY OF _____

Affirmed and subscribed before me this _____ day of _____ 20____ by _____
who is personally known to me or who has produced _____ (type of ID) as identification.

Signature of Notary Public, State of Florida
Notarial Seal

Print, Type or Stamp Name of Notary

RESIDENTIAL NEEDS APPROVAL OF BUILDING OFFICIAL

Inspector

Inspection completed by _____ Date _____ Power Company called: _____

by _____ Date _____ Talked to _____