

LINN COUNTY ELECTRICAL PERMIT APPLICATION

Planning & Building Department PO Box 100, Albany, OR 97321 Phone: 541-967-3816

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PLEASE COMPLETE ALL SECTIONS, 1 THROUGH 4.

| 1. LOCATION OF INSTALLATION | PERMIT NO. E | | |
|--|---|--------------------------|------------------|
| Twp Rg Section Tax Lot | Issued by | | |
| | | | |
| Building Permit | 3. COMPLETE FEE SCHEDULE | : BELOW | |
| Property Owner | A. Residential per unit | | Inspections |
| Address | Service included: | Items Cost (ea.) | Sum allowed |
| City County | 1000 sq. ft. or less | 113.00 | 4 |
| Direction <u>s</u> | Each additional 500 sq. ft./portion | | |
| | Limited Energy-Residential Only | 48.00 | 1 |
| Job Description | B. Services/Feeders Installation | n, Alteration or Reloc | <u>cation</u> |
| | 200 amps or less | 85.00 | 2 |
| Work Performed by | 201 amps to 400 amps | 100.00 | 2 |
| PERMITS ARE NON-TRANSFERABLE AND NON-REFUNDABLE | 401 amps to 600 amps | 167.00 | 2 |
| AND EXPIRE IF WORK IS NOT STARTED WITHIN 180 DAYS OF | 601 amps to 1000 amps | 218.00 | 2 |
| ISSUANCE OR IF WORK IS SUSPENDED FOR 180 DAYS. | Over 1000 amps or volts | 500.00 | |
| | Reconnect only | 68.00 | 2 |
| 2.(A) CONTRACTOR INSTALLATION ONLY | C. Temporary Services/Feeders | s Installation, Alterati | on or Relocation |
| Electrical Contractor | 200 amps or less | 68.00 | 2 |
| Address | 201 amps to 400 amps | 92.00 | 2 |
| City State OR Zip Code | Over 401 amps to 600 amps | 134.00 | 2 |
| Phone: Job No | Over 600 amps or 1000 volts see | "B" above | |
| Contractor Lic. Expires | D. Branch Circuits - New, Altera | ation or Extension pe | er panel |
| Contractor's Board NoExpires | a) The fee for branch circuits with purchase of service or feeder | | |
| SUPRERVISING ELECT'N: | Each branch circuit | 5.00 | 2 |
| License No. Expires | b) The fee for branch circuits with | hout purchase of servi | ce or feeder |
| | First branch circuit | 58.00 | 2 |
| 2. (B) FOR OWNER INSTALLATIONS | Each additional circuit | 5.00 | 2 |
| Owners Name | E. Miscellaneous (service or Fo | eeder Not Included) | |
| Address | Each pump or irrigation circle | 68.00 | 2 |
| City State Zip Code | Each sign or outline lighting | 68.00 | 2 |
| Phone Number | Commercial limited energy pane | el 68.00 | 2 |
| THIS INSTALLATION IS BEING MADE ON PROPERTY I OWN | F. Each additional inspection of | over the | |
| WHICH IS NOT INTENDED FOR SALE, LEASE OR RENT. | allowable in any of the above | 92.00 | |
| Owner's signature | | | |
| DO NOT COVER ANY WORK UNTIL APPROVAL IS GRANTED. | 4. Fees | | |
| | A. Enter total of above fees | | |
| OFFICE USE ONLY | 12% surcharge (.12 x subtotal) |) | |
| | Subtotal | | |
| | B. Enter 25% of line A for Plan R | leview | |

Balance Due