



Gilchrist County Building Department

209 SE 1st Street Trenton, FL 32693
Phone: (352) 463-3173 Fax: (352) 354-9113

Date Submitted: _____

Please print

Electrical Permit Application

Owner/Applicant Information		
Owner/Builder Affidavit must be submitted if owner applying for permit		
Owner Name:	Proof of Ownership: <input type="checkbox"/> Recorded Deed <input type="checkbox"/> Other	
Address:		
Phone #:	Email:	
Contractor Information		
Name/Company:	License #:	
Address:		
Contact Phone:	Email:	
Agent Name:	Phone #:	Email:
Project Information		
Job Valuation: \$	N.O.C. Required if \$2,500 and over in value	
<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Agriculture	<input type="checkbox"/> CFEC <input type="checkbox"/> Duke <input type="checkbox"/> Clay	
Project Address:		
City:	State:	Zip:
Parcel Number:	<input type="checkbox"/> Zoning Approval for City	
Description of work to be done:		
Improvement: <input type="checkbox"/> New <input type="checkbox"/> Service Change Out <input type="checkbox"/> Upgrade <input type="checkbox"/> Repair <input type="checkbox"/> Addition <input type="checkbox"/> Renovation <input type="checkbox"/> RV Pole <input type="checkbox"/> Temp		
<input type="checkbox"/> Pool/Pool Heater <input type="checkbox"/> Sign <input type="checkbox"/> Pump/Well <input type="checkbox"/> Lift Station <input type="checkbox"/> Generator <input type="checkbox"/> Low Voltage <input type="checkbox"/> Reconnect Existing Service		
Number of systems:		
Existing Service Amperage:	Upgraded Service Amperage:	
Size of Service Conductors:	Number of Meters:	

YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature of Owner/Contractor/Agent Date
STATE OF FLORIDA COUNTY OF Gilchrist County – The foregoing instrument was acknowledged before me by means of physical presence or online notarization this _____ day of _____, 20_____.
By: _____ (Printed Name of Individual Acknowledging)

Individual identified by: Personal Knowledge Satisfactory Evidence: Type: _____

Signature of Notary Public - State of Florida Stamp:
Printed Name of Notary Public or Stamp