



**Town of Windermere**

614 Main Street  
P.O. Drawer 669  
Windermere, FL 34786  
Phone: 407-876-2563

Date: \_\_\_\_\_

Permit No: \_\_\_\_\_

**Application for Electrical Permit**

**WARNING TO OWNER:** 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 RECORDING YOUR NOTICE OF COMMENCEMENT.

PLEASE PRINT

The undersigned hereby applies for a permit to make electrical installations as indicated below on property.

Project Address \_\_\_\_\_, Windermere 34786  
Property Owner \_\_\_\_\_ Phone \_\_\_\_\_  
Property Owner's Mailing Address \_\_\_\_\_

Tax I.D. Number: Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ Sub \_\_\_\_\_ B&L \_\_\_\_\_  
Legal Description: Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Class of Building: Old  New  Type of Building: Residential  Commercial  Other   
Type of Work: New  Alteration  Addition  Repair  Low Voltage New  Existing

Date First Inspection Desired: \_\_\_\_\_ or will call for inspection  Is power needed? Yes  No

**INDICATE THE QUANTITY OF ALL EQUIPMENT TO BE INSTALLED**

Dishwasher \_\_\_\_\_ Exhaust Fan \_\_\_\_\_ Disposal \_\_\_\_\_ Water Heater \_\_\_\_\_  
Hood Fan \_\_\_\_\_ Dryer \_\_\_\_\_ Paddle Fan \_\_\_\_\_ Outlets \_\_\_\_\_  
Fixtures \_\_\_\_\_ Spa \_\_\_\_\_ Pool \_\_\_\_\_ Switches \_\_\_\_\_  
Electric Signs \_\_\_\_\_ Meter Reset \_\_\_\_\_ Low Voltage \_\_\_\_\_ Stoves \_\_\_\_\_  
Pumps \_\_\_\_\_ Motors \_\_\_\_\_ Air Conditioning (tons) \_\_\_\_\_ Furnace (KW) \_\_\_\_\_  
Temporary Construction Pole \_\_\_\_\_

**One (1) New Meter Service** \_\_\_\_\_ Amperage/Voltage/Phase

**Four (4) or More** \_\_\_\_\_ **New Meter Services Same Size:** \_\_\_\_\_ Amperage/Voltage/Phase

**Meter Service Upgrade** from \_\_\_\_\_ to \_\_\_\_\_ = \_\_\_\_\_  
Amperage/Voltage/Phase Amperage/Voltage/Phase Difference in Size

**Relocate** Existing Meter Service (No Service Size Change) \_\_\_\_\_

**Other:**

\_\_\_\_\_

**PERMIT FEE BASED ON METER SERVICE SIZE SCHEDULE** ..... \$ \_\_\_\_\_  
(IF NO METER SERVICE WORK BEING DONE, USE VALUATION OF JOB FOR PERMIT FEE)  
 **VALUATION OF JOB = \$** \_\_\_\_\_ **PERMIT FEE = \$** \_\_\_\_\_  
(VALUATION OF ALL MATERIALS, LABOR, AND FIXTURES INSTALLED) **REVIEWER** \_\_\_\_\_

I hereby certify that the above is true and correct to the best of my knowledge. PLEASE PRINT

Name of Business Organization \_\_\_\_\_

QB License Number \_\_\_\_\_

Name of Active Certificate Holder (Master Electrician) \_\_\_\_\_

State Registration or Certification Number \_\_\_\_\_

I hereby make Application for Permit as outlined above, and if same is granted I agree to conform to all Florida Building Code Regulations and Town Ordinances regulating same and in accordance with plans submitted. The issuance of this permit does not grant permission to violate any applicable Town and/or State of Florida codes and/or ordinances.

Authorized Signature (*License Holder or Agent*) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone Number \_\_\_\_\_

**NOTE: The Building Permit Number is required if the Electrical Installation is associated with any construction or alteration where a Building Permit has been issued.**

**Building Permit Number** \_\_\_\_\_