## Application for Electrical Permit

**OFFICIAL USE ONLY**

<table>
<thead>
<tr>
<th>Plan Examiner</th>
<th>Date</th>
<th>Permit No.</th>
<th>Zoning Dist.</th>
<th>Fee ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PLEASE PRINT</strong></td>
<td>Address of Installation (Number, Direction, Street, City, Zip Code)</td>
<td>Real Estate Index No.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Property Owner Name:</td>
<td></td>
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<tr>
<td>Address of Owner: (Number, Direction, Street, City, Zip Code)</td>
<td>Area Code/Telephone No.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Permit No.</td>
<td>Electrical Contractor Company:</td>
<td>Contractor License No.</td>
<td>Certificate of Registration City</td>
<td></td>
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<tr>
<td>Address of Contractor: (Number, Direction, Street, City, Zip Code)</td>
<td>Area Code/Telephone No.</td>
<td></td>
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</tr>
</tbody>
</table>

### Check All Appropriate Boxes

<table>
<thead>
<tr>
<th>Service/Feeder</th>
<th>Circuits</th>
<th>New Home Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercom</td>
<td>Monthly Maintenance (Month)</td>
<td>Telephone</td>
</tr>
<tr>
<td>TV</td>
<td>Fire Alarm</td>
<td>Central Vacuum</td>
</tr>
<tr>
<td>Fiber</td>
<td>Security System</td>
<td>Other:</td>
</tr>
</tbody>
</table>

### Services

<table>
<thead>
<tr>
<th>Voltage</th>
<th>Phase</th>
<th>Wire</th>
<th>Amps</th>
</tr>
</thead>
</table>

**BELOW PLEASE FILL IN DESCRIPTION OF WORK**

Estimated Cost of Job: $____

Supervising Electrician: I hereby certify that the information provided on this application is true and correct, and that all work performed under authority of this permit shall be installed by myself or by employees of the licensed contractor listed above, under my supervision. I further certify that all work to be performed in conformance with all applicable code requirements.

**SIGNATURE: ____________________________ DATE: ________________

Revised: 01/2017  Friendship • Progress • Citizenship • Government
VILLAGE OF MERRIONETTE PARK
INSPECTION SCHEDULE FOR ADDITIONS AND NEW STRUCTURES

5 Building Inspections
1. Footing formed up before pouring
2. Foundation wall formed up before pouring
3. Framing before siding or brick
4. After insulation
5. Final

3 Electrical Inspections
1. Service change
2. Rough in
3. Final

3 Plumbing Inspections
1. Ground work before covering up
2. Rough in
3. Final

DRIVEWAYS
1. Pre-pour Concrete
2. Blacktop
3. Final

GARAGES
1. Concrete floor before paving/pouring
2. Footing formed up before pouring
3. Foundation wall formed up before pouring
4. Final

FENCES
1. Hole Depth – 42” in Concrete
2. Final

SHEDS
1. Slab inspection and layout – with no slab
2. Final

ROOFING
1. Tear off sheathing
2. Final

SWIMMING POOLS
1. Final
2. Electric Inspection
1. Ground preparation
2. Final

IN-GROUND POOL
1. Plumbing Permit + Inspection
MERRIONETTE PARK FOLLOWS THE 2014 CHICAGO ELECTRICAL CODE

MUST USE GROUND FITTING AND STRAP CONNECTED TO METER RACEWAY FOR GROUND ROD. GROUND WIRE FROM METER RACEWAY MUST CONNECT TO SEPARATE ACORN GROUND FITTING ON GROUND ROD.

'SERVICE MUST BE GROUNDED TO STREET SIDE OF WATER METER AND WATER METER MUST BE JUMPERED.'

SERVICE PANEL AND ALL SUB-PANELS MUST BE LABELED.

WIRE FILL MUST COMPLY FOR OUTLET BOX SIZE OR DEEP OUTLET BOX SHALL BE INSTALLED. (WIRE FILL SHALL NOT BE OVER MAXIMUM NUMBER OF CONDUCTORS PER CODE.)

ALL RECEPTACLES SHALL BE SELF GROUNDING TYPE OR GREEN GROUNDING CONDUCTOR MUST BE USED.

KITCHEN ISLAND AND PENINSULA'S MUST HAVE G.F.I. PROTECTED RECEPTACLES.

ALL RECEPTACLES IN KITCHEN MUST BE G.F.I. PROTECTED (NOT BEHIND BUILT-IN UNITS OR REFRIGERATOR).

FRONT AND REAR OUTSIDE OF BUILDING MUST HAVE WEATHER-PROOF G.F.I.-PROTECTED-RECEPTACLE.

EACH BATHROOM AND POWDER ROOM MUST HAVE SEPERATE CIRCUIT 20 AMP. G.F.I. PROTECTED RECEPTACLE. (MAY SHARE WITH OTHER BATHS, NO OTHER OUTLETS ON THIS CIRCUIT.)

ANY BATHROOM THAT HAS A MOTORIZED UNIT (SAUNA - WHIRLPOOL, ETC.) MUST HAVE THE LIGHT FIXTURES IN THAT ROOM G.F.I. PROTECTED. (NOT PROTECTED BY REQUIRED 20 AMP. G.F.I. RECEPTACLE.)

SMOKE DETECTORS ARE REQUIRED IN ALL BEDROOMS AND COMBINATION CARBON MONOXIDE / SMOKE DETECTORS IN ADJACENT HALLS. MINIMUM OF 1 COMBINATION CARBON MONOXIDE / SMOKE DETECTOR ON ALL LEVELS.

ALL BEDROOM OUTLETS MUST HAVE ARC-FAULT PROTECTION. (NOT SMOKE DETECTOR OR FIRE ALARM WIRING OUTLETS.)

NO BARE INCANDESCENT LAMPS IN CLOTHES CLOSETS.

SUMP PUMP RECEPTACLE ON SINGLE RECEPTACLE. (NOT G.F.I. PROTECTED). ALL OTHER BASEMENT RECEPTACLES MUST BE G.F.I. PROTECTED.
Village of Merrionette Park

Municipal Electric Approval Form

*Property Owner/Customer of Record/Builder: ____________________________
*Sub-Division Name ____________________________

*Address where service is to be provided: ____________________________
*Lot Number if applicable: ______________

*City/Village/Township (if unincorporated): ____________________________
*Zip Code: ______________
*County: ____________________________
*Taxing Town property is located in ____________________________

*Mailing address if different than Service Address:
City: ____________________________ State: ____________________________ Zip Code: ______________

Contractor/Electrician Name & Phone# ____________________________

*Select One From Each Group Below*

<table>
<thead>
<tr>
<th>New Construction:</th>
<th>Upgrade/Revision/Relocate:</th>
<th>Fire/Storm Damage repair:</th>
<th>Other:</th>
<th>explain:</th>
</tr>
</thead>
</table>

*Residential: Single Family | Multi Unit | *Commercial:

*Type of Service:
Overhead | Underground | Overhead to Underground

*Voltage: | *Phase:
120/240 | 1 Phase: | 120/208 | 3 Phase | 277/480 |

*Amperage:
100 | 200 | 400 | Other |

Metering type (if applicable):
Subtractive Metering (When fitting is wired to load side of meter)

Comments: ____________________________

*Date Service was approved by municipality ____________________________

*Municipal Inspector Information:
*Name ____________________________ Phone: ____________________________
*Fax: ____________________________

For Commercial, Industrial or Residential Service Fax completed form to 636-684-3701
For New Residential Underground Service in a new subdivision of 5 or more lots, fax completed form to 636-684-3550
*Denotes required field, if not provided approval will be returned back