

ROWAN COUNTY FISCAL COURT
600 WEST MAIN STREET
MOREHEAD, KY 40351

PHONE: (606) 784-6345

FAX: (606) 784-3535

EMAIL: rcsw@windstream.net

APPLICATION FOR ELECTRICAL PERMIT

Date _____

Permit Number _____

Property Location _____

Residential Commercial

Type of Work New Addition/Alter Repair

Description of Work _____

Work to be completed by: Owner Electrician*

*If work performed by electrician, fill out Owner and Electrical Contractor Information below.

Owner Information:

Property Owner _____

Owner Address _____

Phone _____

Electrical Contractor Information:

Master Electrician License # ME-_____ Occup. License: Yes__ No__ Ins.: Yes__ No__

Electrician Name _____

Electrician Address _____

Phone _____

Applicant certifies that all information given is correct to the best of my knowledge and that all pertinent electrical ordinances will be complied with in performing the work for which this permit is issued.

APPLICATION SIGNATURE