

**(A) Applicant** Name: **BASIC ELECTRIC COMPANY** Address: **1234 SOME STREET** City: **FAST CITY** St.: **KY** Zip: **41014** Phone: **859.555.1212**  
**Builder / Owner** Name: **KEVIN POPP** Address: **12537 SLEPPY HOLLOW LANE** City: **BURLINGTON** St.: **KY** Zip: **41018** Phone: **859.525.2314**  
**Inspection Address** Name: **SAME** Address: **SAME** City: **SAME** St.: **KY** Zip: **41018** Phone: **SAME**

**(B) Description Of Work:** **GARAGE**    Contact Person / Email: **BRENT JACOBS**    **BACOBBS@BASICELECTRIC.COM**  
 Single Family  Sq. Feet \_\_\_\_\_ Two Family  Apartments  No. Of Units \_\_\_\_\_ Other (Pool, Store, Factory, Garage, Etc.) **GARAGE**  
 Electric License # **CE-12592**    Occupational License # **BC-12908643**    Lot # \_\_\_\_\_ Job # \_\_\_\_\_ Estimated Value of Job Including All Equipment, Material and Labor \$: \_\_\_\_\_

**(C) Type of Inspection Request, Check All Applicable Items**

Detached Miscellaneous (DM)	<input type="checkbox"/>	Pool/Fountain Bonding (PB)	<input type="checkbox"/>	Service Survey (SS)	<input type="checkbox"/>	New Construction (NC)	<input type="checkbox"/>	Added Wiring (AW)	<input type="checkbox"/>
Stables, Barns, Garages, Etc. (SBE)	<input checked="" type="checkbox"/>	Pool/Fountain Wiring (PW)	<input type="checkbox"/>	Survey Defined Area (SP)	<input type="checkbox"/>	Service Only (SE)	<input type="checkbox"/>	Service/Added Wiring (SAW)	<input type="checkbox"/>
Sign, Billboard, Neon (SB)	<input type="checkbox"/>	Pool/Fountain Bonding/Wiring (PBW)	<input type="checkbox"/>	Survey Total (ST)	<input type="checkbox"/>	Construction Temporary (CT)	<input type="checkbox"/>	Heat/Cooling Added/Replaced (HAR)	<input type="checkbox"/>
Low Voltage Wiring (LVW)	<input type="checkbox"/>	Mobile Home/Manufactured Home (MH)	<input type="checkbox"/>	Plan Review (PR)	<input type="checkbox"/>	Field Consultation (FC)	<input type="checkbox"/>	Equipment Added/Replaced (EAR)	<input type="checkbox"/>
Fire Alarm (FA)	<input type="checkbox"/>	Festival / Event Wiring (FW)	<input type="checkbox"/>	Phone Booth or Stand (PBS)	<input type="checkbox"/>	Other: Attach Request	<input type="checkbox"/>		<input type="checkbox"/>

**(D) Residential and Non-residential Equipment Wiring Information, Complete All Applicable Items, Attach Additional List if Necessary.**

# Light Fixtures	6	# Panels	1	# 1 Ø Motors		Total Horsepower		# Welder Receptacles	
# Receptacles	4	# Circuits	4	# 3 Ø Motors		Total Horsepower		# Sp. Recepts./Attach List	
# Disposals/Tot. HP		# Water Htr./Tot KW		# Blower Motors		# Elect. Space Htrs.		Total KW	
# Dishwashers		# Ranges/Tops/Tot KW		# AC/HP Units		# Electric Furnances		Total KW	
# Kitchen Equipment		# Ovens/Total KW		# HVAC/RTU Units		# Duct Heaters		Total KW	
# Exit/EM Lights		# Dryers/Total KW		# Controllers		# Em. Generators		Total KW	

Estimated Fault Current At Service Terminals \_\_\_\_\_ Volts/Phase \_\_\_\_\_  
 No. Feeders/Sizes \_\_\_\_\_    Const. Temp. (OH) (UG) \_\_\_\_\_    Volts/Phase \_\_\_\_\_    Total HP \_\_\_\_\_    Total KW \_\_\_\_\_  
 No. 1Ø Transf./Sizes \_\_\_\_\_    Amps \_\_\_\_\_    Service Switch \_\_\_\_\_    Meters \_\_\_\_\_  
 No. 3Ø Transf./Sizes \_\_\_\_\_    Perm. Service: Service Conductors (OH) (UG) \_\_\_\_\_    UG \_\_\_\_\_    1Ø No. Sets \_\_\_\_\_    1  
 #Signs/Transf. \_\_\_\_\_    Total Amps \_\_\_\_\_    Size 1/Ø AL \_\_\_\_\_    1Ø Service SW. \_\_\_\_\_    100    # Meters \_\_\_\_\_    1  
 No. 1Ø Transf./Sizes \_\_\_\_\_    Amps \_\_\_\_\_    Volts \_\_\_\_\_    120/240 1P 3W \_\_\_\_\_    # Meters \_\_\_\_\_    1  
 No. 3Ø Transf./Sizes \_\_\_\_\_    3Ø No. Sets \_\_\_\_\_    Size \_\_\_\_\_    3Ø Service Sw. \_\_\_\_\_    Amps \_\_\_\_\_  
 Septic Temp: \_\_\_\_\_    Perm: \_\_\_\_\_    # Meters \_\_\_\_\_    # Meters \_\_\_\_\_

**(E) Charge Account**  Cash Account     Check For Temporary Release     Utility : Duke or Other: **OWEN**  
 Requested Dates : Attach Request  WILL CALL    Total Number of Inspections Requested **2**

**(G) Application** is hereby made to do electrical work at this location and I agree to pay Electric Inspection (EI) the appropriate amount per the current schedule of charges. As a charge customer, I agree to pay per the policies as stated in the company's credit terms or, as a cash customer, I realize that all fees must be paid prior to the issuance of any releases and the policies as stated in the company's credit terms shall apply. All work is to be installed per the current National Electrical Code and I understand that there are or will be no violations of the NEC or Kentucky statutes and regulations and EI does not determine compliance with any plans or specifications. It is my responsibility to call when the job is ready for inspection and I assume all liability for the job and any temporary releases and hereby indemnify EI for all activity associated with this job. Progress inspections do not constitute approval of an electrical installation. This permit is null and void if an inspection is not scheduled within six months from date of issue or six months from date of last inspection. I, the applicant, hereby sign and verify under penalties of law, that all of the above information is true and correct and that I am performing the electrical work at this location. Any changes to the above information shall be provided in writing.

**BRENT JACOBS**    Signature    **BRENT JACOBS**    Print Name    **Finish & Email**