

# Application for Electrical Work

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

Building Permit # \_\_\_\_\_

Electric Inspection  
www.NKYEI.com  
admin@nkyei.com2012 Callie Way, Suite #102  
Union, Kentucky, 41091  
Voice (859) 746-9111 Fax (859) 746-9124Remittance:  
PO Box 98  
Union, Ky. 41091 Residential One and Two Family / Manufactured Home  
 Three family and greater & Non-residential Structures.

(A)  Single Family/Sq. Feet \_\_\_\_\_  Two Family \_\_\_\_\_  Apartments / No. Of Units: \_\_\_\_\_ Other: Pool, Store, Tenant Finish, Garage, Barn, Sign, etc.: \_\_\_\_\_  
Estimated value of job including all equipment, material, labor and subcontracts. \$: \_\_\_\_\_ / \_\_\_\_\_

(B) 

Applicant	Name	Address	City	State	Zip	Phone
Owner						
Job Address						

CE License # \_\_\_\_\_ Lot # \_\_\_\_\_ Job # \_\_\_\_\_ Contact Person: \_\_\_\_\_  
Description Of Work: \_\_\_\_\_ Email: \_\_\_\_\_

(C) Type of inspection request. Check all applicable items.  Per application and attached. (Attach additional information as required)  Per application and Plans Submitted.

<input type="checkbox"/> Plan Review (PR)	<input type="checkbox"/> Service Only (SE)	<input type="checkbox"/> HVAC Added / Replaced (HAR)	<input type="checkbox"/> Low Voltage / Fire Alarm (LV/F A)	<input type="checkbox"/> Detached Misc. (DM)
<input type="checkbox"/> Field Consultation (FC)	<input type="checkbox"/> Added Wiring (AW)	<input type="checkbox"/> Equipment Added/Replaced (EAR)	<input type="checkbox"/> Garage, Stable, Barn (GSB)	<input type="checkbox"/> Survey (Identify type)
<input type="checkbox"/> Construction Temp. (CT)	<input type="checkbox"/> Service & Added Wiring (SAW)	<input type="checkbox"/> Festival / Event Wiring (FW)	<input type="checkbox"/> Pool / Hot Tub Bonding (PB)	<input type="checkbox"/> (S) Service (D) Defined Area (T) Total
<input type="checkbox"/> New Construction (NC)	<input type="checkbox"/> Mobile / Manufactured Home (MH)	<input type="checkbox"/> Sign, Billboard, Neon (SB)	<input type="checkbox"/> Pool / Hot Tub Wiring (PW)	<input type="checkbox"/> Solar Panels & Equip. (SPE)

(D) Utility \_\_\_\_\_ Construction Temporary (OH) (UG) \_\_\_\_\_  
Volts & Phase \_\_\_\_\_ # Meters \_\_\_\_\_  
No. Sets \_\_\_\_\_ Size: \_\_\_\_\_  
Amps: \_\_\_\_\_ Service Switch: \_\_\_\_\_  
Service Conductors: 1Ø (OH) (UG) \_\_\_\_\_ # of Meters: \_\_\_\_\_  
No. Of Sets: \_\_\_\_\_ Size: \_\_\_\_\_  
Volts: \_\_\_\_\_ Amps: \_\_\_\_\_  
Service Switch: \_\_\_\_\_  
Service Conductors: 3Ø (OH) (UG) \_\_\_\_\_ # of Meters: \_\_\_\_\_  
No. Of Sets: \_\_\_\_\_ Size: \_\_\_\_\_  
Volts: \_\_\_\_\_ Amps: \_\_\_\_\_  
Service Switch: \_\_\_\_\_

(E) Estimated Fault-current amps at service main breaker: \_\_\_\_\_  
Number of Feeders / Size / Amps: \_\_\_\_\_  
Solar Panels: Total Number of Panels / Total KW : \_\_\_\_\_ / \_\_\_\_\_  
Total # of Inverters / Microinverters / Total KW : \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Provide residential load calculations in accordance with Article 220 and the estimated fault-current amps at the service main breaker ; examples calculations and forms are available upon request.  
Other: Attach List; \_\_\_\_\_  
Septic Construction Temp. Release #: \_\_\_\_\_ CI #: \_\_\_\_\_  
Septic Permant Service Release #: \_\_\_\_\_

(F) **Residential Wiring Information:** No. of Panels: New / Altered \_\_\_\_\_ / \_\_\_\_\_  
No. of Circuits: New / Extended, Altered: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Branch Circuits Installed: \_\_\_\_\_ Poles / Breaker Size / Type

Location / Item :	No.circuits	wire size C/A	Standard	GFCI	AFCI	AF / GF
Lighting & Recepts.		#14				
Lighting & Recepts.		#12				
Small Appliance		#12				
Bathroom Circuit		#12				
Garage Circuit		#12				
Range						
Dryer						
Laundry						
Water Heater						
AC / HP Unit						

Other : Attach List if necessary: \_\_\_\_\_

(G) **Non-residential wiring information:**  
Number of Panels ; New or Altered: \_\_\_\_\_ / \_\_\_\_\_  
No. of Circuits : New, Extended, Altered: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
No 1Ø Mtrs. \_\_\_\_\_ Total HP \_\_\_\_\_ No 3Ø Mtrs. \_\_\_\_\_ Total HP \_\_\_\_\_  
Generators/KW: \_\_\_\_\_ / \_\_\_\_\_ No Signs/Transf./Drivers \_\_\_\_\_ / \_\_\_\_\_  
Number of 1Ø Transformers / Size / Amps: \_\_\_\_\_  
Number of 3Ø Transformers / Size / Amps: \_\_\_\_\_

**For EI Use: EI Permit #**

Type Of Work: \_\_\_\_\_  
Territory: \_\_\_\_\_  
County / City: \_\_\_\_\_  
Estimated Fee: \_\_\_\_\_  
Amount Received: \_\_\_\_\_  
Receipt Date: \_\_\_\_\_  
Issue Date: \_\_\_\_\_  
Building Entered: \_\_\_\_\_  
Construction.Ent.: \_\_\_\_\_

(H)  Charge Account  Cash Account  Check for Temporary Release of Permant Service. Total number of inspections requested. \_\_\_\_\_

(I) 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 and I agree to the terms and policies as stated in the company's credit terms. 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 EI cannot insure or guarantee 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 installation and any temporary releases and hereby indemnify EI for any and all activity and cost associated with this 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. Progress inspection approvals do not constitute approval of the electrical installation. 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.

(J) \_\_\_\_\_  
Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

Owner		Job Location			City		Job # / Lot #	
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Date	ST	AT	CT	TOJ	TT	End Mile	Start Mile	Total Mile

Ares or Equipment Inspected		Insp. Results	Re. Date	Inspector

No. of Panels:	No. of Circuits:					
New / Altered:	Total / :	New /	Altered /	Extended./	Existing	
Pnl. #1	/	/	/	/	/	
Pnl. #2	/	/	/	/	/	

TCS # \_\_\_\_\_  
 FO# \_\_\_\_\_  
 Ufer / ISB \_\_\_\_\_ / \_\_\_\_\_ Rods: \_\_\_\_\_

Branch Circuits Installed: Poles / Breaker Size / Type													
Location / Item :	Panel No. #1						Panel No. # 2						
	No. Circuits	Wire Size	Std.	GFCI	AFCI	AF / GF	No. Circuits	Wire Size	Std.	GFCI	AFCI	AF / GF	
Lighting / Recep.		#14											
Lighting / Recep.		#12											
Small Appliance		#12											
Bathroom Circuit		#12											
Garage Circuit		#12											
Dishwasher													
Disposal													
Range													
Dryer													
Laundry													
Water Heater													
AC / HP Unit													
Gas Furnace													
Electric Furnace													

Recep.: GFCI \_\_\_\_\_ Recep.: AFCI \_\_\_\_\_  
 Recep.: WP \_\_\_\_\_ Recep.: Single \_\_\_\_\_  
 Dish. \_\_\_\_\_ Fan Box: \_\_\_\_\_  
 Disp. \_\_\_\_\_ FBO: \_\_\_\_\_  
 CTop \_\_\_\_\_ Oven \_\_\_\_\_ Wtr.Htr. \_\_\_\_\_  
 AC /HP \_\_\_\_\_  
 Electric Furnace \_\_\_\_\_  
 El.Sp.Htr. \_\_\_\_\_ Kit. Equip. \_\_\_\_\_  
 Panels: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Feeders: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Transformers.: \_\_\_\_\_  
 \_\_\_\_\_  
 Motors 1P: \_\_\_\_\_  
 Motors 3P: \_\_\_\_\_

Other: \_\_\_\_\_  
 \_\_\_\_\_  
 Directions / Other: \_\_\_\_\_  
 \_\_\_\_\_