

City of Mt. Vernon
Electrical Permit Application
417-466-2167

Date: _____ Permit #: _____

Site Address: _____

Owner Name: _____ Ph. # _____

Address: _____

Electrical Contractor: _____

Phone #: _____

Activity:

Service/meter change: ___ Underground ___ Overhead ___

Service and panelboard change: ___

New work: ___ Complete rewire: ___

Other: _____

Amperage service to be installed: _____ A.

Structure type: Residential: ___ Commercial: ___ (Rough-in inspections required, may be partials).

Note: All work to be performed in accordance with National Electric Code 2005. Final inspection of finished work is required. Rough-in inspection required on complete rewires.

Signed: _____ (Owner/contractor/owner's agent).

Date: _____

Permit Fee: _____

Utility Connection Fee: _____

Total Fees: _____

Building Officer: _____ Fee Paid: City Clerk: _____