



**Town of Avoca**  
**P.O. 160**  
**222 N. Old Wire Road**  
**Avoca, AR 72711**  
**479-621-5921**  
**townofavoca@sbcglobal.net**

Electrical Permit No. \_\_\_\_\_  
Parcel No. \_\_\_\_\_  
Date Application Submitted \_\_\_\_\_  
Date Application Approved \_\_\_\_\_  
Date Application Expires \_\_\_\_\_  
(For Office Use Only)

## ELECTRICAL PERMIT APPLICATION

Application and plans must be complete in order to be accepted for plan review.

Applications will not be accepted through the mail or fax.

Please print clearly.

### SITE LOCATION:

Site Address: \_\_\_\_\_  
Suite Number: \_\_\_\_\_ Floor: \_\_\_\_\_ New Tenant: YES NO  
Tenant Name \_\_\_\_\_

#### PROPERTY OWNER:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

#### ELECTRICAL CONTRACTOR INFO:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_ Phone: \_\_\_\_\_  
Electrical License No: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_  
Insurance Company: \_\_\_\_\_  
Policy #: \_\_\_\_\_

#### BUILDER INFO:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_ Phone: \_\_\_\_\_  
Contractor No: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_

#### VALUATION OF PROJECT: (Contractor's Bid Price)

\$ \_\_\_\_\_

Scope of work (please provide detailed information):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will Service be altered: YES NO

Adding more than 50 amps? YES NO

Type of use: \_\_\_\_\_

Type of work:

\_\_\_ New \_\_\_ Addition \_\_\_ Service Change \_\_\_ Low Voltage \_\_\_ Tenant Improvement  
\_\_\_ Remodel \_\_\_ Generator \_\_\_ Temporary Service \_\_\_ Fire Alarm \_\_\_ Telecommunications

Property served by:

\_\_\_\_\_ Carroll Electric \_\_\_\_\_ SWEPCO

Permit Fee: \_\_\_\_\_