



CITY OF LONG BEACH, MISSISSIPPI
PO BOX 929
LONG BEACH, MS 39560
TELEPHONE: 228-863-1554
FAX: 228-865-0822



APPLICATION FOR ELECTRICAL PERMIT

DATE: _____

BUILDING PERMIT NO. _____

OWNER: _____

ADDRESS: _____

- | | |
|---|--|
| <input type="checkbox"/> AMP SERVICE | <input type="checkbox"/> COOK TOP |
| <input type="checkbox"/> BRANCH CIRCUITS | <input type="checkbox"/> DISPOSAL |
| <input type="checkbox"/> AMP FEEDER | <input type="checkbox"/> VACUUM PUMP |
| <input type="checkbox"/> KW HEAT | <input type="checkbox"/> FREEZER (COMMERCIAL) |
| | <input type="checkbox"/> COMPACTOR |
| <input type="checkbox"/> WASHING MACHINE | <input type="checkbox"/> FREEZER |
| <input type="checkbox"/> DISH WASHER | <input type="checkbox"/> REFRIGERATOR |
| <input type="checkbox"/> BATHROOM SPACE HEATER | <input type="checkbox"/> SERVICE / NAME CHANGE |
| <input type="checkbox"/> ATTIC FAN | <input type="checkbox"/> NEW SERVICE |
| <input type="checkbox"/> X-RAY EQUIPMENT | <input type="checkbox"/> CORRECT WIRING OF OCCUPANCIES |
| <input type="checkbox"/> WELDER | <input type="checkbox"/> METER SERVICE |
| <input type="checkbox"/> DRYER | <input type="checkbox"/> TEMP METER / POLE |
| <input type="checkbox"/> COMMERCIAL FRYER | <input type="checkbox"/> SWIMMING POOL |
| <input type="checkbox"/> WALL OVEN | <input type="checkbox"/> MOTOR INSTALLATION |
| <input type="checkbox"/> RANGE | <input type="checkbox"/> OTHER |
| <input type="checkbox"/> WINDOW AIR COND. UNITS | <input type="checkbox"/> SUB PANEL |
| <input type="checkbox"/> ELECTRIC WATER HEATER | <input type="checkbox"/> INSPECTION FEE |

REMARKS: _____

I HEREBY CERTIFY THAT I UNDERSTAND THE CODES AND AMENDMENT
 THERETO APPLICABLE TO THIS LOCALITY AND AGREE TO INSTALL ALL WORK
 ACCORDINGLY.

CONTRACTOR: _____

BY: _____