



Building Department
69 S. Main St
Oberlin, Ohio, 44074
Phone (440) 774-3428
Fax (440) 774-9035
www.cityofoberlin.com

RESIDENTIAL PLAN APPROVAL and PERMIT APPLICATION

ELECTRICAL

Date _____

Project Name _____ Address _____ Sub Lot _____
Property Owner _____ Address _____ City _____ State _____
Telephone # _____ Cell Phone # _____ Email _____

Permanent Parcel # _____ Zoning District _____ Historical Landmark Yes _____ No _____ Unknown _____

Contractor _____ Address _____ City _____
Zip _____ Telephone # _____ Cell # _____ Email _____
Are you currently Registered Yes _____ No _____ Registration # _____

Electrical: New* _____ Remodel/Alteration* _____ Addition* _____ Accessory Structures* _____ Total Sq. Ft.** _____

* Submit Load Calculations for New, Additions, Service Change & Accessory Structures

** Total Sq. Ft. includes any addition Sq. Ft. **PLUS** any other area Sq. Ft. having ANY work Done

Miscellaneous: Added Lighting _____ Plugs _____ Circuits _____ Numbers of Each _____

Low Voltage: alarm _____ cable _____ cat 5 _____

Service : Repair (STORM DAMAGE) _____ Upgrade _____ Replace _____ **TEMPORARY** _____ (See Note)

NOTE: TEMPORARY POLES SHALL HAVE CORRECT ADDRESS POSTED

Panel: Add _____ Replace _____ Upgrade _____

Generator: Portable Connect _____ Permanent Connect _____

Requires Separate Generator Application

Electric Hot Water Tank: _____ Tankless _____ (Volts _____, Amps _____) **Instant Hot** _____

Hot Tub/ Spa _____

Solar / Wind Turbines: _____

Submit Separate schematic and wiring

Inverters: Upgrade _____ Replace _____

Other: _____

Installations must be in accordance with the National Electrical Code, the current edition, and Referenced Documents

One (1) percent (%) will be added for STATE SURCHARGE to subtotal of building permits.

By signing this application, I certify that I am an authorized agent for performing the work stated above and all information provided is true. I further understand that if any information is found to be incorrect or falsely stated that this permit will be null and void and that I may be responsible for violation of other local ordinances.

Date _____

Estimated Cost _____

Please Print Name _____

Signed _____

Telephone/ Cell # _____

Application: Approved _____ Denied _____ By: _____ Date: _____