

CITY OF MIDDLETOWN  
DIVISION OF BUILDING INSPECTION  
ONE DONHAM PLAZA  
MIDDLETOWN, OH 45042  
513-425-7973 FAX: 513-425-7921  
www.cityofmiddletown.org

# ELECTRIC

Complete all sections below. Please Print

Application Date: \_\_\_\_\_ Permit No. \_\_\_\_\_ Project No. \_\_\_\_\_  
(Office Use Only) (Office Use Only)

Job Address \_\_\_\_\_

Owner \_\_\_\_\_ Occupant \_\_\_\_\_

Owner's Address \_\_\_\_\_

☐ RESIDENTIAL (1, 2 or 3 family) ☐ COMMERCIAL

Number of Circuits new/added \_\_\_\_\_

☐ Single Family ☐ One-Family attached \_\_\_\_\_ # of units ☐ Apartments \_\_\_\_\_ # of units ☐ Condo \_\_\_\_\_ # of units

DESCRIBE PROJECT: \_\_\_\_\_

TYPE OF WORK: (Check all that apply)		Construction Poles and New Construction require separate permits
New Construction	<input type="checkbox"/>	<b>BUILDING SERVICE ENTRANCE or CONSTRUCTION POLE</b> (must be filled in completely or service cannot be released to Duke Energy.) New _____ Existing _____ House Meter _____ Multiple Meter Base <input type="checkbox"/> Yes <input type="checkbox"/> No Service Conductor Wire: Aluminum <input type="checkbox"/> Copper <input type="checkbox"/> Wire Size _____ No. of Sets _____ Feeder type: Underground <input type="checkbox"/> Overhead <input type="checkbox"/> No. of Meters _____ Amps _____ Voltage _____ Phase _____ No. of Meters Added _____
Construction Pole	<input type="checkbox"/>	
Service Entrance	<input type="checkbox"/>	
Baseboard Heat	<input type="checkbox"/>	
Room Addition	<input type="checkbox"/>	
Added Wiring	<input type="checkbox"/>	<b>ADDITIONS OR ALTERATIONS</b> Existing Service Size _____ amps Have you calculated that this addition will not overload the existing service? Yes _____ No _____
Swimming Pool	<input type="checkbox"/>	
Garage	<input type="checkbox"/>	
Heating/Cooling	<input type="checkbox"/>	
Temporary Electric Release	<input type="checkbox"/>	<b>Temporary power release expires in 90 days. All electric must be inspected and approved for permanent power.</b>

**Contractor:**

Name \_\_\_\_\_ Company \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

PLEASE READ AND SIGN. **I, the undersigned do hereby affirm:** The above statements are true and correct and also agree to comply with the provision of the ordinances of the City of Middletown. I will comply with all conditions of the permit once issued. The proposed work is authorized by the owner in fee and I have the authorization to make this application. Upon notification of approval, permit fee must be paid and permit obtained within thirty (30) days, or application will be canceled. The information requested on this application may be relied upon by the City in considering the permit. Any false statement made knowingly may be grounds for criminal action under state and local law: Ohio Revised Code §2921.13, Middletown Codified Ordinance § 606.10

Owner/Occupant ☐ Master License Holder ☐

(Please print name)

(Signature)

NOTE: This application will expire 12 months after plan approval if a permit is not issued, or 12 months after application date if plans are not approved.