VI LLAGE OF ARDSLEY 507 ASHFORD AVENUE ARDSLEY, NEW YORK 10502

Phone: 914-693-1550 Fax: 914-693-3706

ELECTRICAL PERMIT APPLICATION

Date: Permit Fee:			
Address:			
Section:	Sub Sec:	Block:	Lot:
for: Prope	erty Owner:		
Lesse	ee:		
Contr	ractor:		
Description of	of electrical work to be perfo	ormed/installed:	
It is agreed th	hat all of the work described the laws of the State of Nev	l above will be installed by	y myself or my employees
Electrician:_		License #:	
Company:	mpany: Phone #:		#:
Address:			
City:		State:	Zip:
Cost of Work (fee = \$15.00	k:	_ Signature: f work, minimum fee is \$^	75.00)

FILES: FORMS/electrical permit application rev 1/12