



# RESTRICTED ELECTRICAL ENERGY APPLICATION

Phone 541-997-2141 ext. 2 • florencepermits@ci.florence.or.us

**CITY OF FLORENCE**  
**COMMUNITY DEVELOPMENT / BUILDING**

**250 HIGHWAY 101**  
**FLORENCE, OR 97439**

## PLEASE PRINT

**Please complete all sections, 1 through 5.**

### 1. Location of Installation:

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Tax Lot \_\_\_\_\_ Map No. \_\_\_\_\_

Directions \_\_\_\_\_

Commercial ☐ Residential ☐

Tenant Name

(if commercial)

**This permit becomes null and void if the work authorized by the permit is not commenced within 180 days from the date of issuance of such permit or if the work authorized is suspended or abandoned at any time after work is commenced for a period of 180 days. Electrical permits are non-refundable and non-transferable.**

### 2. Contractor application:

Electrical Contractor \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_ Job Number \_\_\_\_\_

Property Owner \_\_\_\_\_

Contractor's License No. \_\_\_\_\_

Contractor's Board Reg No. \_\_\_\_\_

City License No. \_\_\_\_\_

Phone No. \_\_\_\_\_

### 3. Owner applications:

Print Owner's Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

*This permit is issued under OAR 918-320-370. The application agrees to make only restricted energy installations (100 volt amps or less) under the permit and to do the following:*

- 1. Only use electrical licensed persons to do installations where required. (Certain residential and other transactions are exempt from licensing. These have asterisks (\*). All others need licensing.)*
- 2. Call for an inspection when all the installations under this permit are ready for inspection.*
- 3. Purchase separate permits for all installations that are not ready for inspection when the inspector is out to inspect under this permit.*
- 4. Assume responsibility for assuming that all corrections required by the inspector are done, and*
- 5. Assume responsibility for calling for a final inspection when all of the corrections are complete.*

*The person signing this permit must be the applicant or a person authorized to bind the applicant.*

Signature \_\_\_\_\_

Authority if other than applicant \_\_\_\_\_

Rev. 07/25

Project No. \_\_\_\_\_ Permit No. \_\_\_\_\_

Label No. \_\_\_\_\_ Date \_\_\_\_\_

Issued By \_\_\_\_\_ Office \_\_\_\_\_

### 4. Type of work:

#### RESIDENTIAL

**Restricted Energy Fee \$103.19**  
**(for all systems combined)**

#### Check type of work involved:

- ☐ Audio and Stereo Systems\*
- ☐ Burglar Alarm
- ☐ Telephone Systems\*
- ☐ Garage Door Opener\*
- ☐ Fire Alarm
- ☐ Heating, Ventilation and Air conditioning systems\*
- ☐ Vacuum Systems\*
- ☐ Other

#### COMMERCIAL

**For each system \$103.19**  
**(see OAR 918-260-260)**

- ☐ Boiler Controls
- ☐ Clock Systems
- ☐ Data Telecommunication Installations
- ☐ Fire alarm Installation
- ☐ HVAC
- ☐ Instrumentation
- ☐ Intercom and Paging Systems
- ☐ Landscape Irrigation Control\*
- ☐ Medical
- ☐ Nurse Calls
- ☐ Outdoor Landscape Lighting\*
- ☐ Protective Signaling
- ☐ Other

\_\_\_\_\_ **Number of Systems**

\* No licenses are required. Licenses are required for all other installations.

### 5. Fees:

**Enter Fee from column** \$ \_\_\_\_\_

12% State Surcharge \$ \_\_\_\_\_

6% Technology Fee, 5% Admin Fee \$ \_\_\_\_\_

**Total Due** \$ \_\_\_\_\_

Building Department email florencepermits@ci.florence.or.us  
(541) 997-2141 ext. 1  
**FOR INSPECTIONS CALL**