

Township of Leslie

4279 Oak – Box 577
 Leslie, MI 49251
 517-589-8201 (fax 517-589-0010)

ELECTRICAL PERMIT APPLICATION

Date Issued: _____

Parcel # **33-14-14-**_____ Building Permit # _____

COMPLETE ALL APPLICABLE SECTIONS: INCOMPLETE APPLICATIONS WILL BE RETURNED

Residential	Commercial	Industrial	FEE	TOTAL
			265.	
			265.	
			205.	
			205.	
			145.	
			145.	
			145.	

List Work To Be Done	Number	List Work To Be Done	Number
Service Size (Amps)		Electrical Heating Units – Baseboards	
Circuits		Power Outlets – Ranges, Dryers, etc.	
Lighting Fixtures		Smoke Detectors / Fire Alarms	
Dishwasher		Feeders & Bus Duct.	
Air Conditioners – Transformers		Other Motors	
Furnace – Unit Heater		Signs	

Consumers Energy Request # _____ Tri County Rural Electrical Account # _____

Property Owner _____ Daytime Phone Number _____

Exact Location of Work Site **and** Nearest Crossroad _____

Contractor's Name **and** Business Name _____

Contractor's Signature _____ Email _____

Contractor's Address _____ City _____ State _____ Zip _____

Contractor's Telephone Number _____ Fax Number _____

License Number _____ Expiration Date _____ Federal Employer ID # _____

Workers Comp Ins. Carrier _____ MESC Employer # or Reason for Exemption _____

SECTION 23A of the State Construction Code Act of 1972, Act No. 230 of the Public Acts of 1972, being section 125.1523a of the Michigan compiled Laws prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Violators of sections 23A are subject to civil fines.

HOMEOWNER AFFIDAVIT: I hereby certify the electrical work described on this permit shall be completed by myself, in my single-family dwelling in which I am living or about to occupy. All work shall be done in accordance with the State of Michigan Electrical Code and will not be enclosed, covered, or used until it has been inspected and approved by the Electrical Inspector.

Homeowner's Signature: _____ Email _____

NOTE: Permit void after one (1) year from date of issuance.
FOR INSPECTIONS TELEPHONE MATT WOOD: 517-569-2003