



CITY OF ALTON
DEPARTMENT OF BUILDING & ZONING
101 E. THIRD STREET, SUITE 202
ALTON, IL 62002
PHONE: (618) 463-3532 FAX: (618) 463-0972

COMMERCIAL ELECTRICAL PERMIT APPLICATION

DATE: _____
ADDRESS: _____
OWNER: _____
PHONE: _____
CONTRACTOR: _____
ADDRESS: _____
PHONE: _____

DESCRIPTION OF WORK: _____

COST OF WORK: \$ _____

FOR ANY FAILED ELECTRICAL INSPECTIONS THERE WILL BE A \$35.00 REINSPECTION FEE

This permit is granted on the express condition that the said work shall, in all respects, conform to the Ordinances of the City of Alton, regulating Electrical Installations, and may be revoked at any time upon the violations of any of the provisions of said Ordinances.

The Applicant hereby agrees to notify the Department of Building & Zoning when the wiring installation has been completed and is ready for inspection by the City Electrical Inspector. We do require a 24-hour notice unless it is an emergency.

SIGNATURE: _____

DATE: _____