



City of Blooming Grove  
 200 S. Fordyce, P.O. Box 237  
 Blooming Grove, TX 76626

**APPLICATION FOR ELECTRICAL PERMIT \$30.00**

P: 903-695-2711  
 F: 903-695-2482

ADDN: \_\_\_\_\_ LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_  
 DATE: \_\_\_\_\_ STREET ADDRESS: \_\_\_\_\_  
 NAME OF APPLICANT: \_\_\_\_\_ OWNER \_\_ YES \_\_ NO  
 MAILING ADDRESS: \_\_\_\_\_  
 PHONE #: \_\_\_\_\_

1. Electrical Contractor: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 License #: \_\_\_\_\_

Permit Cost: \$ _____
Permit Paid on: _____
Inspections needed: _____
Inspection Cost: _____
Inspections Paid on: _____
Project Start Date: _____
Project End Date: _____

ELECTRICAL PERMIT USE:

\_\_\_\_\_

ZONING DISTRICT: \_\_\_\_\_ FIRE ZONE: \_\_\_\_\_ yes \_\_\_\_\_ no

PROPOSED BUILDING USE: \_\_\_\_\_

BUILDING TYPE: \_\_\_\_\_ OCCUPANCY GROUP: \_\_\_\_\_

FIRE SPRINKLER \_\_\_\_\_ yes \_\_\_\_\_ no NUMBER OF DWELLING UNITS: \_\_\_\_\_

CLOSEST FIRE HYDRANT LOCATION/DISTANCE: \_\_\_\_\_

NO. OFF STREET PARKING SPACES: \_\_\_\_\_ COVERED \_\_\_\_\_ UNCOVERED \_\_\_\_\_

SQUARE FEET: NEW \_\_\_\_\_ ADDITION: \_\_\_\_\_

WATER RECEIPT REQUIRED \_\_\_\_\_ yes \_\_\_\_\_ no

APPLICANT'S SIGNATURE: \_\_\_\_\_