



ELECTRIC PERMIT APPLICATION

PERMIT # _____

Job Address: _____ Lot # _____ Subdivision: _____

APPLICANT: _____ Phone No: _____

ELECTRICAL CONTRACTOR: _____

CE #: _____ ME #: _____ License Expiration Date: _____

City of Nicholasville Business License # _____

Mailing Address: _____

Phone: _____ Email: _____

DESCRIPTION OF WORK BEING DONE:

APPLICANT'S SIGNATURE: _____

Print Applicant's Name: _____

Fee Paid: _____ / Check # or Cash _____

APPROVED BY: _____ Date: _____

If The Electrical Permit Sticker Must Be Reissued There Is A Fee of \$35.00

517 North Main Street ~ Nicholasville, KY 40356

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