



ELECTRIC PERMIT APPLICATION

Job Address: _____

Permit applications can be submitted to: permits@nicholasville.org

Electrical Contractor / Business Name:

Contractor Full Address: _____

Telephone: _____ Email: _____

Nicholasville / Jessamine County Business Registration # _____

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

DESCRIPTION OF WORK:

Applicant's Signature: _____

Print Applicant's Name: _____

FOR OFFICIAL USE ONLY	JOBADDRESS Building Permit # _____
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