



*City of Ocean Springs, Mississippi
Building Department
1014 Porter Avenue P.O. Box 1800
Ocean Springs, MS 39566-1800
Phone 228-875-6712*

CITY OF OCEAN SPRINGS

A \$26 INSPECTION FEE IS REQUIRED

COMMERCIAL NON OCCUPANCY POWER AFFIDAVIT AND AGREEMENT

DATE _____

EMAIL _____

Property Address: _____ Ocean Springs, MS

Name on Power Account _____

Business Name _____

Business Manager Name (print) _____

Whereas, it is a practice of the City of Ocean Springs, acting by its Building Department, to issue a Certificate of Occupancy allowing companies supplying electric power to supply such electrical power to any completed home or building within the City; and

Whereas, there are circumstances in which it would be extremely advantageous to allow temporary power to the above designated location, the undersigned agrees that in behalf of itself and, if applicable, the owner of said property, that the following will strictly be adhered to in these premises:

1. All wiring is secured in a safe condition, if not fully trimmed then wire nuts must be in place.
2. All appliances such as heaters, water heaters and air conditioners must be connected per Code or feeds terminated in a safe secure manner.
3. If panels are lockable, then panels can be energized prior to connecting all circuits.
4. Contractor is fully responsible for insuring a safe condition exists on this job at all times.
5. You agree to call for and be responsible for **Final Inspection Prior** to any occupancy of this building.

In consideration of the above, the undersigned, individually and as agent for all parties concerned, does hereby hold the City of Ocean Springs, Mississippi, its agents representatives and employees, harmless for any and all damages to persons or property resulting, to result, or growing out of in any way, the granting of this request for temporary electric power on the above referenced property.

Signature

Phone number