



Ocean Springs Building Department
1014 Porter Avenue
Ocean Springs, MS. 39564
Phone 228-875-6712

Electrical Permit Application

Residential _____

Commercial _____

Date _____

Building Permit No._____

Electrical Contractor _____ Phone _____

General Contractor _____

Home/Business Owner _____ Phone _____

Job Address _____ Lot No. _____

Please mark the following such as what size service, how many 110's, and 220's, T-Pole etc.

Residential Service:

200 amp 400 amp 600 amp 800 amp

Circuits:

Single Pole Double Pole Triple Pole

Commercial Service:

200 amp 400 amp 600 amp 800 amp

Circuits:

Single Pole Double Pole Triple Pole

Other:

Temporary Power Pole Corrective/Additional Wiring Generator

I, the undersigned, make application for permit to install electrical service and equipment in the premises described and in accordance with the data given above:

Applicant Signature _____ **Date** _____

Building Official _____ **Date** _____