



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** _____