



# Commercial Electrical Permit

City of Centerton  
 Department of Building Safety  
 P.O. Box 208, Centerton, AR 72719  
 Phone (479)795-2750 / Fax (479)795-2545  
 Email: buildingsafety@centertonar.us

## Project Information

Address \_\_\_\_\_

Project Name \_\_\_\_\_

Electrical Contractor Information	General Contractor or Business Owner Information
Business Name _____	Name _____
Master Electrician Name _____	Address _____
Address _____	City /State/Zip _____
City/State/Zip _____	Phone (    ) _____ - _____
Phone (    ) _____ - _____	Cell (    ) _____ - _____
Cell (    ) _____ - _____	
Email: _____	
License # _____ Exp. _____	

## Commercial Fees

Valuation Cost (Bid) \$0.00 up to \$10,000.00	\$ _____ x 0.01	\$ _____
Valuation Cost (Bid) \$10,000.01 up to \$20,000.00	\$ _____ x 0.005	\$ _____
Valuation Cost (Bid) \$20,000.01 and up	\$ _____ x 0.0025	\$ _____
Education Fee <b>Valuation Cost (Bid)</b>	\$ _____ x 0.0005	\$ _____
<b>Base Fee</b>		<b>\$50.00</b>
<b>Total Amount Due \$</b>		<b>\$ _____</b>

I hereby certify that I have read and examined the application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified here in or not. The granting of a permit does not presume to give authority to, violate or cancel the provisions of any other State or local law regulating construction or the performance of construction. NEC 2017

Contractor Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

Department of Building Safety \_\_\_\_\_ Date \_\_\_\_\_