



PO Box 23039, Barling, Arkansas 72923

(479) 452-1550

APPLICATION FOR ELECTRICAL INSPECTION PERMIT

Address: _____

Addition: _____

Owner: _____

Phone #: _____

Electrician: _____ Contractor's License # _____

List all electrical systems: _____

***ANY INFORMATION WHICH THE APPLICANT FAILS TO SHOW WILL RESULT IN A DELAY IN OBTAINING A BUILDING PERMIT.
THE INFORMATION SHOWN ON THIS FORM IS FACTUAL TO THE BEST OF MY KNOWLEDGE.***

Electrician Signature

Date

Approved by

Date