Electrical Application

☐ Residential ☐ Commercial ☐ Multi-family ☐ Mixed Use ☐ Right of Way

City of Redmond WASHINGTON

Enter Quantities:

____ Feeder
____ Fire Alarm
____ Generator
____ Ground Ufer—per inspector visit
____ Low Voltage
____ New Circuit
____ Service - Added
____ Service - Altered
____ Service - New
____ Subpanel
____ Temporary Service
____ Illuminated Signs

Office Use Only
DATE:_____
ELEC:_____ PAYMENT METHOD:
ACCEPTED BY:_____ _____

*Value of Construction: The value of construction shall include the prevailing fair market value of all labor, materials and equipment, whether actually paid or not, needed to complete the work.

Value of Electrical Work: $ _____

Site Location

Site address:_____ Property owner:_____
Tax parcel number:_____ Mailing address:_____
Project name/Tenant:_____ City:_____ State: _____ Zip:_____
Plat name/Lot number:_____ Phone:_____

Billing Contact (Same As)

☐ Applicant ☐ Owner ☐ Tenant ☐ Design Professional ☐ Contractor ☐ Other _____
Mailing Address_____
Phone: _____ E-mail: _____

Detailed Description of work

_____
_____

General Contractor Information

Company name:_____ E-mail:_____
Mailing address:_____ State contractor's license #:_____
City:_____ State:_____ Zip:_____ Expiration date:_____
Phone:_____ Fax:_____ City of Redmond business license #:_____

Applicant Information

Contact person:_____ Phone:_____
Company name:_____ ☐ Business ☐ Home ☐ Mobile
Mailing address:_____ Fax:_____
City:_____ State: Zip: E-mail:_____

Building Owner or Authorized Agent

I hereby certify that I have read and examined this application and know the same to be true and correct, and I am authorized to apply for this permit.

Print Name:_____ Date:_____

Signature:_____

Electrical Permit Checklist

Electrical Plan Review is Required for the Following Projects

- Installations or alterations of any commercial generator
- Installations identified as requiring electrical plan review in WAC 296-46B Table 010-1 & 010-2

Visit the web site www.lni.wa.gov/tradelicensing/electrical/default.asp and search by WAC 293-46B for complete descriptions.

Table 010-1 Health or Personal Care Facilities [1]	Plan Review Required
Hospital	Yes
Nursing home unit or long-term care unit	Yes
Boarding home or assisted living facility	Yes
Private alcoholism hospital	Yes
Alcoholism treatment facility	Yes
Private psychiatric hospital	Yes
Maternity home	Yes
Ambulatory surgery facility	Yes
Renal hemodialysis clinic	Yes
Residential treatment facility for psychiatrically impaired children and youth	Yes
Adult residential rehabilitation center	Yes

Table 010-2 Educational and Institutional Facilities	Plan Review Required
Educational [2,3]	Yes
Institutional [2,3]	Yes

Notes to Tables 010-1 and 010-2

[1] Wiring methods in accordance with the NEC unless otherwise noted.

[2] Metallic or nonmetallic raceways, MI, MC or AC cable, except that in places of assembly located within educational or institutional facilities, wiring methods must conform to NEC 518.4(a). Places of assembly located within educational or institutional facilities may not be wired according to NEC 518.4(b) or (c)

Electronic Submittal Requirements

☐ **Electrical Plans -** show power and lighting for each floor and location of all electrical panel boards.
☐ **Electrical Panel Schedules -** with loads indicated in volt-amperes (VA) or kilovolt-amperes (KVA) and the listed interrupting rating (A.I.C.) of all overcurrent protective devices.
☐ **Riser Diagram -** Showing the point-to-point available fault current and the raceway size and type, the conductor's size and type, and grounding methods. Include a detail of the grounding electrode system.
☐ **Load Calculation -** Include an electric load summary showing all applicable demand factors.
☐ **Fault Current Calculations -** through the panel board level
☐ **Lighting Budget Calculations -** per Washington State Energy Code

Electronic Plan Standards

File Naming Standards:

Bolded items noted indicate the naming convention in which the particular submittal must be named. For example, the Site Plan must be named **Site Plan**.

Plan Sheet Standards:

All plans must be drawn to scale, as specifically identified in the checklist, and each sheet shall state the scale.

Acceptable File Types

Plans, calculations, reports and supporting documents must be uploaded as a PDF.

Plan Orientation: All plans must be uploaded in "Landscape" format in the horizontal position.