



PLANNING & CODES

205 N. River St., Seguin Texas 78155

Email: Permits@seguintexas.gov

Electrical Permit Application

Date:
Permit Number:

Office Hours: Monday – Friday 9am – 4:30pm Contact Information: 830.401.2435 / 830.401.2440 Email: permits@seguintexas.gov

Contractor Information	Company Name:		Site	Address:		
	Address:					
	City:	St:	Zip:	Owner	Name:	
	Phone:				Address:	
	Licensed with City of Seguin? Yes <input type="checkbox"/> No <input type="checkbox"/> If No, See required information needed.				Phone:	

Description	<input type="checkbox"/>	<input type="checkbox"/> New Construction	Brief Description of Job:
	Residential	<input type="checkbox"/> Addition	
	<input type="checkbox"/>	<input type="checkbox"/> Remodel	Total Square Footage:
	Commercial	<input type="checkbox"/> Repair	

Utility Application is Also Required for any Selected Below

<input type="checkbox"/> Disconnect / Reconnect		<input type="checkbox"/> Temporary Meter	
<input type="checkbox"/> 100 Amp Meter	<input type="checkbox"/> 200 Amp Meter	<input type="checkbox"/> Other _____ Amp Meter	

NOTICE

THIS PERMIT BECOMES NULL AND VOID WITHIN 6 MONTHS OF ISSUANCE. ONE OR MORE EXTENTSIONS OF TIME, FOR PERIODS NOT MORE THAN NINTY (90) DAYS MAY BE REQUESTED, IN WRITING, BEFORE SUCH PERMIT HAS EXPIRED. PERMITS ARE NON-TRANFERABLE FROM ONE PERSON TO ANOTHER.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS 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 HEREIN 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 REQUALATING CONSTRUCTION OR PERFORMANCE OF CONSTRUCTION.

SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT

DATE

SIGNATURE OF OWNER (IF OWNER IS BUILDER)

DATE