

## DEPARTMENT OF BUILDING INSPECTION WORKSHEET FOR ELECTRICAL PERMIT

Please complete **BOTH SIDES** of this worksheet prior to application for permit issuance. Homeowners' applications are processed directly at the Inspection Services on the 4<sup>th</sup> floor. For all other installations, a valid California State Contractors license and a valid San Francisco Business Tax registration are required. Present this worksheet to the Permit Center, 2<sup>nd</sup> Floor. Required information is shown in **bold**.

Job Address:				Permit #		
				Floor (Job L	ocation):	
☐ Contractor		Homeowner (For Surv	eys Only)	Other		
Contractor License #	:	License Class:		Business T	ax License #:	
Contractor Company	Name: (if appli	Applicant Signature:				
Applicant Name:				Applicant Phone:		
Applicant Address:				Applicant Cell Phone:		
Property Owner Name:				Owner Phone:		
Owner Address:				Owner Cell Phone:		
Describe Scope of Work: (Include area(s) of work, electrical distribution equipment, devices, and utilization equipment, if applicable). Locations (describe area, tenant name, suite #, etc.)  Office Use Only						
Services No. & Sizes						
Feeders No. & Size					Circuits	
Panelboards / Switchbo	oards No. & Sizes					
Transformers No. & Siz	es					
No. of Lights	Switches	Receptacles	Fans		Dishwashers	
Garbage Disposals	Microwaves	Ranges	Hydro-ma	ssage Tubs	Smoke Detectors	
Other Equipment:	,	,	•			

PLEASE REVIEW PERMIT FOR ACCURACY, OMISSIONS AND CORRECTIONS REQUIRE A NEW PERMIT. REFER TO THE FEE SCHEDULE FOR FEE DESCRIPTION AND NUMBER OF INSPECTIONS INCLUDED.

For Solar Systems over 4KW, please use Electrical Solar Permit Worksheet and submit to DBI.PVPLANS@sfgov.org

Residentiai Non-Residentiai i	s taken to supply utilization equipm	ent.		
Building Permit Application # (If applicable):	Plumbing Permit # (If applicable):	Valuation of Electrical Work:		
PA#	P	\$		
	·	of 5,000 – 10,000 sq. ft. area		
Category 2: General Wiring: Non-residen	ntial buildings and Residential Building	s over 10,000 sq. ft. in area		
☐ up to 5 outlets ☐ 6 – 20 outlets ☐ 21 or more outlets up to 2,500 sq. ft.	☐ 2,501 − 5,000 sq. ft. ☐ 5,001 − 10,000 sq. ft. ☐ 10,001 − 30,000 sq. ft. ☐ 30,001 − 50,000 sq. ft.	50,001 – 100,000 sq. ft. 100,001 – 500,000 sq. ft. 500,001 – 1,000,000 sq. ft. More than 1,000,000 sq. ft.		
Category 3: Retrofit Service and Distribution up to 225 amps  226 – 500 amps  600 – 1,000 amps	tion Equipment that is not part of Cate 1,200 – 2,000 amps more than 2,000 amps over 600 volts	egories 1 and 2  up to 150 kva  over 151 kva  Fire Pumps		
2,501 – 5,000 sq. ft.	] 10,001 − 30,000 sq. ft. ] 30,000 − 50,000 sq. ft. ☐ 500	0,001 – 500,000 sq. ft. 0,001 – 1,000,000 sq. ft. re than 1,000,000 sq. ft.		
Category 4b: Retrofit Systems of Fire W ☐ Buildings of 6 dwelling units ☐ Buildings of 7-12 dwelling units	or less up to 3 floors [	21 – 30 floors  More than 30 floors		
Category 5: Miscellaneous Installations				
Remodel / Upgrade of Existing Hotel Go	uest/SRO Rooms: Number of Rooms:			
Data, Communications, and Wireless S	ystems: Number of Cables:			
Number of Office <b>Workstations</b> :	Temporary <b>Exhibi</b> No. of Booths/Outl	•		
Number of Exterior <b>Signs</b> :	Number of Interior Signs:			
Garage Door Operator (Requiring recept	tacle installation): Number of Door/s:			
Quarterly Permits (Includes 1 inspection)	(max 5 outlets in any one location)	☐ Quarterly		
Survey ☐ Survey Only <u>or</u> :	Addt'l Hrs:			
Research / Survey & Re	eport: Addt'l Hrs:			
Witness Testing Hours (1 hr min)	☐ Yes ☐ No	Addt'l Hrs:		
No. of <b>Off-Hours</b> (2 hrs min)	No. of Addt'l insp	ections/hours required		
Security Systems. Number of Compone	Energy Management, HVAC, & Low  Voltage. Number of floors			
Plan Review: Number of Hours:	Solar PV Systems			