

Electrical Annual Operating Permit Application

Building Department: 604-990-2480, building@dnv.org, fax: 604-984-9683

Location of Work							ELEC				
Address											
Occupancy Type	☐ Commercial			☐ Industrial				☐ Institutional/Government			
Installation Details of Main Switch	Volts:			Amps:				Phase:			
Owner's Information											
Owner				Title							
Mailing Address				City				Posta	l Code		
Email				Phone				Cell			
I/We hereby make the application for an Electrical Annual Operating Permit to enable us to carry out the electrical work in the below establishment during the next twelve (12) calendar months effective from the date of issue, in accordance with Section 28 of the Electrical Safety Standards Act, Section 18 and 19 of the Safety Standards Regulation Sections 14, 15, and 16 of the Electrical Safety Regulation.											
I/We hereby certify that the following person, employed by the Business or Electrical Contractor, will be responsible for the electrical work performed under the issued permit.											
Owner's Signature								Date			
Electrical Contractor											
Site Contact Name		Electrical Col Licence Num									
Business Name					·				·		
Business Licence Number											
Mailing Address					City	Sity			Postal Code		
Email					Phone				Cell		
Field Safety Rep Information (Employee of the tenant or property owner)											
Company Field Safety Rep Name					CFSR I	Numbe	r				
Site Field Safety Rep Name					SFSR Number						
Site Phone Number											
Site Cell Number											
By signing or clicking the box below, I affirm that the information provided in this application for an electrical permit is true and correct and agree to comply with the BC Electrical Code and Regulations and the District's Construction Bylaw. I further agree to indemnify and save harmless the District of North Vancouver and its employees against all claims, liabilities, judgements and costs arising from any work done pursuant to this permit. A dated log of all electrical work done under the Electrical Annual Operating Permit is to be maintained at all times.											
Signature											
I understand that checking this box constitutes a legal signature					Date						

The personal information collected on this form is done so pursuant to the <u>Community Charter</u> and/or the <u>Local Government Act</u> and in accordance with the <u>Freedom of Information and Protection of Privacy Act</u>. The personal information collected herein will be used only for the purpose of processing this application or request and for no other purpose unless its release is authorized by its owner, the information is part of a record series commonly available to the public, or is compelled by a Court or an agent duly authorized under another Act. Further information may be obtained by speaking with The District of North Vancouver's Manager of Administrative Services at 604-990-2207 or at 355 West Queens Road, North Vancouver.

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