



City of Burnaby  
 Building Department, 4949 Canada Way, BC V5G 1M2  
 Telephone: 604-294-7130 Fax: 604-294-7499  
[www.burnaby.ca/building](http://www.burnaby.ca/building) E-mail: [permits@burnaby.ca](mailto:permits@burnaby.ca)

<i>(Office Use Only)</i>	
Application Date:	_____
Customer Service:	_____

**NOTE:** This application must be completed in its entirety. If any fields are not complete the application WILL NOT BE processed.  
 For applications received via fax, mail or e-mail, an invoice will be e-mailed to the contractor and payment can be made online at:  
[www.burnaby.ca/Online-Services.html](http://www.burnaby.ca/Online-Services.html)

## ELECTRICAL PERMIT APPLICATION FOR SINGLE AND TWO FAMILY DWELLINGS

<b>Building Permit #:</b> <b>BLD</b>	<b>ELE:</b> _____ <i>(Office Use Only)</i>
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**Site Address:** \_\_\_\_\_

**Project Description:** \_\_\_\_\_

**Applicant:**  CONTRACTOR  HOMEOWNER Owners of home with secondary suite **CANNOT** apply for permit

**COMPANY INFORMATION:** Company/Name: \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Technical Safety BC License:** **LEL** **Business License #:** (Burnaby or IMBL) \_\_\_\_\_

**Company FSR Name:** \_\_\_\_\_ **FSR#: CELO** **FSR Class:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Site FSR Name:** \_\_\_\_\_ **FSR#: CELO** **FSR Class:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**New House:**  Yes  No **Single Family Dwelling**  **Two Family Dwelling**  **Secondary Suite:**  Yes  No

<p><b>GENERAL ELECTRICAL WORK:</b> <i>(does not apply to New SFD/TFD)</i></p> <p>VALUE OF WORK: \$ _____</p> <hr/> <p><b>TEMPORARY POLE: (SAW SERVICE)</b></p> <p>VALUE OF WORK: \$ _____</p> <p>Amps: _____ Volts: _____ Phase: _____  <i>(TSS must be installed on a free standing pole only)</i></p> <p><b>MAIN SERVICE:</b> <input type="checkbox"/> New <input type="checkbox"/> Existing</p> <p>Amps: _____ Volts: _____ Phase: _____</p> <p><b>SUBSERVICE:</b> <input type="checkbox"/> New <input type="checkbox"/> Existing</p> <p>Amps: _____ Volts: _____ Phase: _____</p> <p>Amps: _____ Volts: _____ Phase: _____</p> <p><b>SUBPANEL:</b> Amps: _____ Quantity: _____</p> <p><b>POOL:</b> Wiring: <input type="checkbox"/> Yes <input type="checkbox"/> No Bonding: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>EXTRA LOW VOLTAGE:</b></p> <p>VALUE OF WORK: \$ _____</p> <p><input type="checkbox"/> Security Alarm (Min \$250 JV) <input type="checkbox"/> Vacuum</p> <p><input type="checkbox"/> Data <input type="checkbox"/> TV Cable <input type="checkbox"/> Intercom</p> <p><input type="checkbox"/> Phone <input type="checkbox"/> Sound System</p> <p><b>HEATING:</b> <input type="checkbox"/> Baseboard <input type="checkbox"/> Radiant <input type="checkbox"/> Other</p> <p>Watts _____ Fixture Count _____ Total Watts _____</p> <p>Watts _____ Fixture Count _____ Total Watts _____</p> <p><input type="checkbox"/> Heat Loss Calcs. Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Sketch Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>APPLIANCE:</b></p> <table style="width: 100%;"> <tr> <td style="width: 50%;">QTY: _____</td> <td style="width: 50%;">QTY: _____</td> </tr> <tr> <td>Air Conditioner _____</td> <td>Hot Tub _____</td> </tr> <tr> <td>Heat Pump _____</td> <td>Electrical Charger _____</td> </tr> <tr> <td>Range _____</td> <td>Other: _____</td> </tr> </table>	QTY: _____	QTY: _____	Air Conditioner _____	Hot Tub _____	Heat Pump _____	Electrical Charger _____	Range _____	Other: _____
QTY: _____	QTY: _____								
Air Conditioner _____	Hot Tub _____								
Heat Pump _____	Electrical Charger _____								
Range _____	Other: _____								

*"I hereby declare that the Provincial licence and/or certification is in effect and valid and that all other information contained in this application is accurate. I acknowledge that the City is relying on this declaration for issuance of permit. I further confirm that all work performed under this permit shall be done in accordance with all applicable City of Burnaby Bylaws and Provincial Regulations."*

*The information on this form is collected under the authority of the current Electrical Bylaw and in accordance with the Freedom of Information and Protection of Privacy Act. The purpose of the collection is to process your application for an electrical permit. It will be retained as record of your application and may be used to contact the parties involved in this project. If you have any questions about the collection and use of this information, please contact the Building Department at 604-294-7130.*

\_\_\_\_\_  
 Name (Print)

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date