



Commercial Electrical Permit

City of Centerton
Department of Building Safety
P.O. Box 208, Centerton, AR 72719
Phone (479)795-2750 / Fax (479)795-2545
Email: cmatherly@centertonar.us
rcoffelt@centertonar.us

Project Information

Address _____ Business _____
Owner _____ Today's Date _____

Electrical Contractor Information	General Contractor or Business Owner Information
Business Name _____	Name _____
Master Electrician Name _____	Address _____
Address _____	City /State/Zip _____
City _____	Phone () _____ - _____
Phone () _____ - _____	Cell () _____ - _____
Cell () _____ - _____	
Email: _____	
License # _____ Exp. _____	

Commercial Fees

Valuation Cost (Bid) \$0.00 up to \$10,000.00	\$ _____ x 0.01	\$ _____
Valuation Cost (Bid) \$10,000.01 up to \$20,000.00	\$ _____ x 0.005	\$ _____
Valuation Cost (Bid) \$20,000.01 and up	\$ _____ x 0.0025	\$ _____
Education Fee Valuation Cost (Bid)	\$ _____ x 0.0005	\$ _____
	Base Fee	\$50.00
	Total Amount Due \$ _____	

I hereby certify that I have read and examined the 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 here in 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 regulating construction or the performance of construction. NEC 2014

Contractor Signature _____ Print Name _____ Date _____
Department of Building Safety _____ Date _____