



Iredell County Building Standards

349 North Center Street P.O. Box 788 Statesville, NC 28687
[Online Permitting, Plan Review and Inspection Requests](#)
[Email Us Your Questions](#)



TEMPORARY POWER APPLICATION/ PERMIT

Temporary power is issued for sixty (60) days only. Temporary power may be extended for additional sixty (60) day intervals - conditionally, following inspection, and authorization by field inspection staff. Each sixty (60) extension will incur an additional fee for renewal. It is the owner/applicant's responsibility when notified, to reconcile all fees associated with extension of temporary power.

Temporary power, which has not been extended, will be disconnected without further notice; (per [section 204.9.2](#) of the NC Administrative Code and Policies Code).

I/We, the undersigned request temporary electrical power for construction purposes only.

PERMIT #: _____

DATE: _____

APPLICANT: _____

PROPERTY OWNER: _____

PROJECT ADDRESS: _____

Portions of the electrical system to be energized are limited to:
LIGHTS, EQUIPMENT, & OUTLETS PROTECTED BY GFCI (ground fault circuit interrupters).

The Inspection Department shall have the electricity disconnected in case of a hazard, illegal occupancy of the building, or the inability, caused by others to make proper inspections. The Inspection Department reserves the right to have the power disconnected for violation of the above without prior notice to the owner or their agent. The applicant has secured written permission from the other contractor's involved in this project and they are aware that power is being connected to this building.

BY MY SIGNATURE BELOW I CERTIFY I HAVE READ, UNDERSTAND, AND AGREE WITH THE CONDITIONS OUTLINED HEREIN, AND IF DISCONNECTION OCCURS DUE TO MY NON-COMPLIANCE I AUTHORIZE THE INSPECTION DEPT. AND THE SERVING UTILITY TO DISCONNECT THE POWER AND HOLD THEM HARMLESS FROM ANY DAMAGES WHICH MAY RESULT FROM THEIR ACTIONS. IN ADDITION I CERTIFY THAT I AM THE OWNER OR THEIR AUTHORIZED AGENT.

APPLICANT: _____
(Signature)

Date: _____ Phone: _____