

10 Crane Mountain Road
Saint John, NB E2M 7T8

Mailing Address: P.O. Box 3032
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Electrical Building Permit Application

For Office Use Only	
Issue Date:	File No:
Fee:	Receipt No:
LSD/Municipality:	
Fax Permit to: <input type="checkbox"/> Saint John <input type="checkbox"/> Moncton <input type="checkbox"/> Fredericton	

Submit completed form along with a copy of "Electrician's Application for Electrical Wiring"
Incomplete forms may delay permit process

Date of Application: _____

Property Information

Owner's Name: _____ Phone: _____

Mailing Address: _____ Postal Code: _____

Electrician Information

Name: _____ Phone: _____

Civic Address of Job: _____ Postal Code _____

PID (located on Property Tax Bill): _____

Municipality or Local Service District: _____ County: _____

Reason for Electrical Work Being Done: _____

Payment Authorization for one-time charge of \$25.00

Name on Credit Card: _____

Visa or MasterCard # _____ Expiry Date: _____

Authorized Signature of Credit Card Holder: _____

This application is for electrical work only. No construction, renovation, demolition, or relocation is involved.

Signature of Owner or Authorized Agent

Print Name