

ELECTRICAL CONTRACTOR AUTHORIZATION AND DECLARATION OF COMPLIANCE

A. Installation (If faxing this document, please PRINT clearly):

Permit Number:				
Installation name:			Location of Work Site:	
Suite no.:	Street no.:	Street name:	Street type:	NSEW:
City:				

B. Licensed Electrical Contractor:

Licensed Electrical Contractor (EC) name (please print):		
License No.:	Telephone: ()	Fax: ()
City:		

C. Declaration: (to the electrical inspection office/and supply authority)

Field Safety Representative No. (FSR):	FSR Classes:
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"I _____ a field safety representative for the above licensed contractor, hereby declare that the electrical installation authorized under the above mentioned permit has been installed to comply with the Safety Standards Act and Regulations of British Columbia."

Field Safety Representative (FSR) Signature:	Date: YYYY MM DD
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Work in progress All work is complete Installation safe (6 month safety check)

<input type="checkbox"/> Rough wiring as noted below may be covered on (date): <input type="checkbox"/> Complete <input type="checkbox"/> Partial (specify area): _____ <input type="checkbox"/> Slab <input type="checkbox"/> UFER Ground <input type="checkbox"/> Underground	YYYY MM DD
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<input type="checkbox"/> Electrical installation is ready for connection as noted below: <input type="checkbox"/> New Service <input type="checkbox"/> Temporary Construction Service <input type="checkbox"/> Service Repair <input type="checkbox"/> Service Change From: _____ To: _____	
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Type of grounding electrode:	<input type="checkbox"/> Rod	<input type="checkbox"/> Ufer	<input type="checkbox"/> Plate	<input type="checkbox"/> Other-describe: _____
Voltage (line to line)	AMPS	Phase	Electric Heat	
V	A	Ø	kw	

Electrical work completed without an installation permit in accordance with the provisions of the BC Safety Standards Act:
Description of work:

<input type="checkbox"/> Non-Compliances of YYYY MM DD have been corrected.

Remarks: _____

