CITY OF SEDALIA
200 SOUTH OSAGE AVE.
SEDALIA, MO 65301
660.827.3000
WWW.CITYOFSEDALIA.COM

Electrical Permit Application

Date:_____

Job Address:_____

Building/Property Owner

Name:_____

Mailing Address:_____

_____

City, State, Zip_____

Electrical Contractor

Name_____

Mailing Address:_____

_____

City, State, Zip_____

Class of work: New Addition Alteration Repair

Describe work:

_____

_____

_____

	No.
Receptacles	
Drops	
Motors & Generators	
New Home	
Circuits-1st Five	
Circuits Over Five	
XFMRS & Rectifiers	
Neon Outlining & Electric Signs	
Ranges & Heating Devices	
Temporary Service	
Permanent 0-200 A	
201-1000 A	
Over 1000 A	