



Pasco County Building Inspections
7508 Little Road,
New Port Richey, FL 34654
(727) 847-8127

Pasco County Building Inspection Division
Temporary Commercial Power Request

Date _____

The undersigned requests a temporary electrical release from _____
(Power Company)

For a period not to exceed thirty days.

Building Permit Number: _____ Address: _____

Parcel ID: S _____ T _____ R _____ Sub _____ Blk _____ Lot _____

I understand that all temporary electrical releases granted by Pasco County are subject to the following conditions:

1. If the above request is granted, a temporary power release will be given to the Contractor only, for the period of time needed to complete building and/or site work.
2. If the above time limit is exceeded without securing a written extension from Pasco County, and/or if the building is occupied by owner or tenant without a valid Certificate of Occupancy, the undersigned may be prosecuted pursuant to the Pasco County Code.
3. If the above request is granted, the undersigned contractor and/or property owner Shall appear and defend all actions against Pasco County arising out of the exercise Of said release and shall indemnify and save Pasco County; its officers, employees and agents; harmless and free of all claims, demands, actions, or cause of every kind and description arising out of or in any way connected with the exercise of said Release.

I agree to the above conditions: By: _____
(Signature)

Name: _____
(Print Name)

Title: _____ Phone Number: _____
(License holder for General Contractor)

Note: Tie In survey must be supplied in order to obtain power.

For Departmental use only:
Form taken by _____
Chief Electrical Inspector _____
Building Official _____

Tie in Survey _____
Date released _____

**COMMERCIAL TEMPORARY POWER REQUEST
STATEMENT OF CONDITIONS OF USE**

All impact fees must be paid prior to the release of temporary power. This form must be completed and signed by both the general contractor and the electrical contractor in order to obtain temporary power for construction purposes.

WE WISH TO RECEIVE TEMPORARY ELECTRICAL POWER FOR BUILDING PERMIT # _____

LOCATED AT: _____

FOR A PERIOD OF _____ DAYS, WHICH WILL NOT EXCEED 30 DAYS FROM DATE OF TURN ON

THIS IS TO BE USED FOR:(Please Check)

- 1. Interior finish purposes. Receptacles being used must be GFCI protected.
- 2. Testing of Air conditioning or for acclimatization purposes.
- 3. Installation and testing of Elevators
- 4. Installation and testing of Kitchen Equipment
- 5. Lighting
- 6. Fire Marshall test purposes

REQUESTED ITEMS MUST BE WIRED AND READY FOR INSPECTION WHEN CALLED. A TEMPORARY POWER INSPECTION MUST BE CALLED AND ALL ITEMS CHECKED MUST PASS.

I certify I will NOT permit use of electric on this project other than those items requested above. I will prohibit any person or subcontractor from violating this agreement and using power in a hazardous or unauthorized manner. I understand violation of this Agreement will justify IMMEDIATE SHUT OFF OF POWER and I further understand VIOLATION of this Agreement will prohibit me from applying for Temporary Power for a period not less than two years from date of violation.

(General Contractor Print Name)

(General Contractor Signature)

The foregoing instrument was acknowledged before me this _____ of _____, _____ by _____ who has produced _____ as identification and who did ; did not take an oath.

Notary Public, State of Florida

I certify I will maintain ALL TEMPORARY POWER in a safe manner until the Certificate of Occupancy is issued. I WILL LOCK OFF ACCESS TO UNCOMPLETED AREAS and/or LOCK OFF SERVICE TO AREAS where exposed wiring has not been completed. I understand violation of this Agreement will justify IMMEDIATE SHUT OFF OF POWER and I further understand VIOLATION of this agreement will prohibit me from applying for Temporary Power for a period not less than two years from date of violation.

(Electrical Contractor Print Name)

(Electrical Contractor Signature)

The foregoing instrument was acknowledged before me this _____ of _____, _____ by _____ who has produced _____ as identification and who did ; did not take an oath.

Notary Public, State of Florida