

REQUEST FOR TEMPORARY POWER

DATE \_\_\_\_\_

BUILDING \_\_\_\_\_

BUILDING PERMIT # \_\_\_\_\_

ADDRESS \_\_\_\_\_

ELECTRICAL PERMIT # \_\_\_\_\_

BUILDING OFFICIAL

\$50.00 FEE REQUIRED

City of Winter Garden  
Building Department  
8 N. Highland Ave.  
Winter Garden, FL 34787

The undersigned hereby requests permission to connect the electric current to the above named building for a maximum period of \_\_\_\_\_ days prior to the final inspections.

Cut on Date \_\_\_\_\_

Cut off Date \_\_\_\_\_

The reason for temporary electric current is as follows:

\_\_\_\_\_  
\_\_\_\_\_

The undersigned also certifies that the wiring, apparatus and fixtures of the entire building are in such condition that electrical current may safely be connected therewith for such period of time and there exists a necessity for this request.

The undersigned also understands and agrees that approval of this request does not constitute a waiver of procuring a Certificate of Occupancy prior to any type of occupancy. Do not stock or furnish this building without the consent of the Building Official.

The undersigned also understands and agrees that by granting this pre-power, the City of Winter Garden absolves itself of any liability in the event of an electrically related injury.

The undersigned also understands and agrees that the equipment room main disconnect and all power panels that are not completely wired and covered will be kept locked, except when working on same, and one key issued to the master or electrician foreman on the job.

\_\_\_\_\_  
General Contractor (Print)

\_\_\_\_\_  
General Contractor (Signature)

\_\_\_\_\_  
Master Electrician (Print)

\_\_\_\_\_  
Master Electrician (Signature)

\_\_\_\_\_  
Owner (Print)

\_\_\_\_\_  
Owner (Signature)

\_\_\_\_\_  
Electrical Inspector (Print)

\_\_\_\_\_  
Electrical Inspector (Signature)

\_\_\_\_\_  
Building Official (Print)

\_\_\_\_\_  
Building Official (Signature)

STATE OF FLORIDA  
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this \_\_\_\_\_ by \_\_\_\_\_,  
(DATE)  
who is personally known to me, or has produced \_\_\_\_\_, as identification and who  
did/did not take an oath.

\_\_\_\_\_  
NOTARY PUBLIC