



INSPECTION DIVISION

ONE & TWO-FAMILY DWELLING
CONDITIONAL UTILITY REQUEST

Phone: 919.249.3418
Fax: 919.249.3407

Application Date _____ Permit No. _____
General Contractor/Owner Name _____ Phone _____
Project Address _____ **Apex, NC** ZIP _____
Subdivision _____ Lot Number (new construction only) _____
Property Owner _____ Phone _____
Address _____ City _____ State _____ ZIP _____
Main Structure: Single-Family Dwelling Duplex Townhome

Utility Type:

Conditional Electrical Service Conditional Gas Service

Owner/Agent Statement:

Utility service is requested for the single-family dwelling located at the address listed on this application. By my signature to this document I agree to all of the following conditions:

1. Full and complete responsibility of the energized electrical and/or mechanical systems, their use, and all equipment connected thereto and to maintain a safe working environment during the completion of the dwelling.
2. That service will be authorized for connection by the appropriate utility only after the conditional final inspection is approved (no partial approvals).
3. That the dwelling must be secured against unauthorized entry (all doors and windows installed).
4. That no furniture or personal possessions will be placed in the dwelling, garage, or any other portion of the dwelling.
5. That no occupancy will be permitted until a Certificate of Occupancy is issued.
6. Utility services are to be in the same names as the contractor/owner indicated above.
7. I agree that any violation of these terms will result in an automatic revocation of this privilege.

(General Contractor or Owner) Name _____ Signature _____ Date _____
(print)

STATE OF NORTH CAROLINA, COUNTY OF WAKE

I, _____, a Notary Public for Wake County, North Carolina, do hereby
certify that _____ personally appeared before me this day and acknowledged
the due execution of the foregoing instrument.

Witness my hand and official seal, this the _____ day
of _____, 20____.

Seal

My Commission Expires _____

Notary Public