



**Community Development Department**  
**Building Division**  
 10770 West Oakland Park Boulevard · Sunrise, FL 33323  
 P: 954.572.2354  
 website: sunrisefl.gov · email: askbuilding@sunrisefl.gov

For official use only:  
**APP #:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Complete: \_\_\_\_\_

**ELECTRICAL ADDENDUM TO PERMIT APPLICATION**

**Name of Project/Plaza/Tenant** \_\_\_\_\_

Job Address \_\_\_\_\_ Unit/Bay # \_\_\_\_\_ Folio \_\_\_\_\_

Is the proposed work a corrective action for a code violation?  No  Yes Case # \_\_\_\_\_

Description of Work \_\_\_\_\_

Code in Effect: FBC \_\_\_\_\_

Total Estimated Value: Entire Project \$ \_\_\_\_\_ This Application \$ \_\_\_\_\_

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contractor Name \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Designer Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Tenant Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Provide the following quantities (if applicable):**

Number of 30 day temp test: \_\_\_\_\_ Number of light poles: \_\_\_\_\_

Number of fixtures: \_\_\_\_\_ Number of wall signs: \_\_\_\_\_

Number of low voltage devices: \_\_\_\_\_

**OFFICIAL USE ONLY**

PERMIT TYPE	QTY	Unit	App. Fee	Rem. Fee
<input type="checkbox"/> New/Addition/Alteration	\$	Value	\$	\$
<input type="checkbox"/> 30 Day Temp for Test		each	\$	\$
<input type="checkbox"/> Burglar Alarm			\$	\$
<input type="checkbox"/> Cell Equipment			\$	\$
<input type="checkbox"/> Demolition			\$	\$
<input type="checkbox"/> Disc. 100 amps or less			\$	\$
<input type="checkbox"/> Disc. Over 100 amps			\$	\$
<input type="checkbox"/> Generator - Residential			\$	\$
<input type="checkbox"/> Lighting Repl./Retrofit			\$	\$
<input type="checkbox"/> Lightning Protection			\$	\$
<input type="checkbox"/> Low Voltage			\$	\$
<input type="checkbox"/> Meter Rel. / Re-energ.			\$	\$
<input type="checkbox"/> Micellaneous			\$	\$
<input type="checkbox"/> Monument Sign			\$	\$
<input type="checkbox"/> Outlets/Appli./Motors			\$	\$
<input type="checkbox"/> Panel New/Replace			\$	\$
<input type="checkbox"/> Pool/Spa/Fountain			\$	\$
<input type="checkbox"/> Service Upgrade/Repair			\$	\$
<input type="checkbox"/> Site Lighting		poles	\$	\$
<input type="checkbox"/> Solar Residential			\$	\$
<input type="checkbox"/> Solar Commercial			\$	\$
<input type="checkbox"/> Special Event			\$	\$
<input type="checkbox"/> Temp Pole / Serv. Con.			\$	\$
<input type="checkbox"/> Wall Sign		each	\$	\$

FEE	AMOUNT
Zoning Balance	\$
Zoning Technology	\$
Fire Permit(s)	\$
Fire DBPR Surcharge	\$
Fire DCA Surcharge	\$
Fire Technology	\$
BRA	\$
BCAIB	\$
FBC	\$
Renewal	\$
Revision	\$
Other	\$
<b>FEE TOTAL</b>	\$
<b>APPLICATION FEE</b>	\$
<b>TOTAL DUE</b>	\$

FOR OFFICE USE ONLY: Application Approved By \_\_\_\_\_ Date \_\_\_\_\_