

Electrical Service (Use Generator Application for Generator Installs) Application #74925



Wednesday, February 4, 2026 8:48 AM

Checklist:

<input type="checkbox"/> Address	<input type="checkbox"/> Application Submitted	
<input type="checkbox"/> Drive/ROW	<input type="checkbox"/> Zoning Review	<input type="checkbox"/> Legal Lot of Record
<input type="checkbox"/> Septic	<input type="checkbox"/> Plans Reviewed	<input type="checkbox"/> Flood Zone
<input type="checkbox"/> Site Use Approved	<input type="checkbox"/> Required Inspections Assigned	<input type="checkbox"/> FDEP Needed
<input type="checkbox"/> Docs Reviewed/Accepted	<input type="checkbox"/> Invoiced	

APPLICANT: DAVID OWENS PHONE: 941-773-0818

ADDRESS: _____

OWNER: OWENS DAVID M, BAKER SHIANN M PHONE: 941-773-0818

ADDRESS: _____

PARCEL ID: 00-00-00-01438-322 SUBDIVISION: THREE RIVERS ESTATES UNIT 23

LOT: 22 BLOCK: 6 PHASE: _____ UNIT: _____ ACRES: 0.85

CONTRACTOR	TYPE	LIC#	BUSINESS NAME
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JOB DETAILS

Residential or Commercial? Residential

Is the power service? New Power Service

What is the power service for? Storage Building

Other job details: future storage building land prep

Special Temporary Use Permit # _____

Type of RV Permit: _____

Power Company Clay Electric

Meter or Account: _____

Meter or Account #: _____

Number of requested AMPS for electrical service: 200

Estimated Electrical Cost 0.00

Is the power currently on? _____

If No, how long has the power been disconnected? _____

Septic # (00-0000) or (X00-000) x26-013

How many houses on this property? _____

COMMERCIAL ONLY - Cost of Job? _____

Review Notes: NEEDED
* PENDING DRIVE