

# Electrical Service (DO NOT use for Generator Install) Application #75418



Thursday, March 5, 2026 12:17 PM

## 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: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

OWNER: NETTLES VINCENT, NETTLES LYNN PHONE: \_\_\_\_\_

ADDRESS: 484 SE ALFRED MARKHAM ST LAKE CITY, FL 32025

PARCEL ID: 34-4S-17-08976-000 SUBDIVISION: \_\_\_\_\_

LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ PHASE: \_\_\_\_\_ UNIT: \_\_\_\_\_ ACRES: 3.24

CONTRACTOR	TYPE	LIC#	BUSINESS NAME
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### JOB DETAILS

Residential or Commercial?  
Is the power service?  
What is the power service for?  
Other job details:  
Special Temporary Use Permit #  
Type of RV Permit:  
Power Company  
Meter or Account:  
Meter or Account #:  
Number of requested AMPS for electrical service:  
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)  
How many houses on this property?  
COMMERCIAL ONLY - Cost of Job?

### Review Notes: