



APP-012  
**Express Electrical Permit Application**

|  |  |  |     |   |  |   |  |
|--|--|--|-----|---|--|---|--|
| <b>GENERAL INFORMATION</b>                             |  |  |     | <b>PROJECT NUMBER</b>                               |  | <b>AUTHORIZATION</b>  |  |
|  |  |  |     |   |  | Permit Tech   |  |
| PROJECT ADDRESS (not mailing address)                  |  |  |     | PROJECT NAME (if any)                               |  |   |  |
| LEGAL DESCRIPTION (i.e., Lot, Block, Tract, APN, etc.) |  |  |     |   |  |   |  |
| CONSTRUCTION VALUATION<br>\$                           |  | USE(S) / OCCUPANCY(IES) (check all boxes that apply)           |     |   |  |   |  |
|  |  | <input type="checkbox"/> One-/Two-Family Dwelling (R-3)        |     | <input type="checkbox"/> Office (B)                 |  | <input type="checkbox"/> Storage/Warehouse (S-1) (S-2)        |  |
|  |  | <input type="checkbox"/> ADU/JADU (R-3)                        |     | <input type="checkbox"/> Retail (M)                 |  | <input type="checkbox"/> Industrial/Manufacturing (F-1) (F-2) |  |
|  |  | <input type="checkbox"/> Apartment/Condominium (R-2)           |     | <input type="checkbox"/> Restaurant (A-2) (B)       |  | <input type="checkbox"/> Other:                               |  |
|  |  | <input type="checkbox"/> Hotel / Motel (R-1)                   |     | <input type="checkbox"/> Assembly (A-1) (A-2) (A-3) |  | <input type="checkbox"/> Other:                               |  |
|  |  | <input type="checkbox"/> Assisted Living Facility (R-2.1)(R-4) |     | <input type="checkbox"/> Parking Garage (U) (S-2)   |  | <input type="checkbox"/> Other:                               |  |
| APPLICANT (first name and last name)                   |  |  |     | <input type="checkbox"/> Agent For                  |  | <input type="checkbox"/> Property Owner                       |  |
|  |  |  |     |   |  | <input type="checkbox"/> Design Professional                  |  |
|  |  |  |     |   |  | <input type="checkbox"/> Tenant / Lessee                      |  |
|  |  |  |     |   |  | <input type="checkbox"/> Contractor                           |  |
| APPLICANT MAILING ADDRESS                              |  |  |     | APPLICANT EMAIL ADDRESS                             |  |   |  |
| CITY   |  | STATE  | ZIP | PHONE #   |  | FAX #   |  |
| PROPERTY OWNER (first name and last name)              |  |  |     | <input type="checkbox"/> Sole                       |  | <input type="checkbox"/> LLC / Corporation                    |  |
|  |  |  |     | <input type="checkbox"/> Partners                   |  | <input type="checkbox"/> Trust                                |  |
| PROPERTY OWNER MAILING ADDRESS                         |  |  |     | PROPERTY OWNER EMAIL ADDRESS                        |  |   |  |
| CITY   |  | STATE  | ZIP | PHONE #   |  | FAX #   |  |
| CONTRACTOR (first name and last name)                  |  |  |     | TYPE OF BUSINESS                                    |  | CITY PIN (if applicable)                                      |  |
| CONTRACTOR MAILING ADDRESS                             |  |  |     | CONTRACTOR EMAIL ADDRESS                            |  |   |  |
| CITY   |  | STATE  | ZIP | PHONE #   |  | FAX #   |  |
| CITY BUSINESS LICENSE #                                |  | EXPIRATION DATE  |     | STATE LICENSE # AND TYPE                            |  | EXPIRATION DATE   |  |

*(I/We) the undersigned declare, under penalty of perjury under the laws of the State of California, that (I am/we are) the owner(s) or authorized representative(s) of the property in this application; that the information on all plans, drawings, and sketches attached hereto and all the statements and answers contained herein are, in all respects, true and correct.*

|           |            |      |
|-----------|------------|------|
| SIGNATURE | PRINT NAME | DATE |
|           |            |      |

| Description Number | <p style="text-align: center;"><b>EXPRESS ELECTRICAL PERMIT <sup>1</sup></b></p> <p style="text-align: center;">Fill in the blank field(s) and/or check the applicable box(es).</p>  | One-Family Dwelling  | Two-Family Dwellings | Multi-Family Dwellings | Nonresidential Buildings |
|--------------------|--|----------------------|----------------------|------------------------|--------------------------|
|                    |  | check applicable box |                      |                        |                          |
| E1                 | <b>Existing Electrical Service.</b> Alter, repair or replace existing [specify capacity] _____ electrical service with same size, number, type and location of existing service. (Note: Max. 600V or max. 225A.)   |                      |                      |                        |                          |
| E2                 | <b>Existing Electrical Service.</b> Alter, repair or replace existing [specify capacity] _____ electrical service with same size, number, type and location of existing service. (Note: Max. 600V or max. 400A. Does not cover work at hazardous location or within H occupancy building.)   |                      |                      |                        |                          |
| E3                 | <b>Existing Electrical Wiring.</b> Alter, repair or replace existing electrical wiring of the same size, number, type and location or proximity.   |                      |                      |                        |                          |
| E4                 | <b>Existing Electrical Wiring.</b> Alter, repair or replace existing electrical wiring of the same size, number, type and location or proximity. Exclude wiring that support lighting fixture(s) or control system(s).   |                      |                      |                        |                          |
| E5                 | <b>Existing Lighting Fixture(s)/Receptacle(s).</b> Alter, repair or replace [specify quantity] _____ existing lighting fixture(s)/receptacle(s) with the same fixture/receptacle type, voltage and wattage at the same location or proximity.  |                      |                      |                        |                          |
| E6                 | <b>Existing Lighting Fixture(s)/Receptacle(s).</b> Alter, repair or replace [specify quantity] _____ existing lighting fixture(s)/receptacle(s), max. 10%, with the same fixture/receptacle type, voltage and wattage at the same location or proximity.   |                      |                      |                        |                          |
| E7                 | <b>Low Voltage Electrical Wiring.</b> Install new or alter, repair or replace existing low voltage electrical wiring. Max. 120V. No penetration(s) into fire-rated assembly.   |                      |                      |                        |                          |
| E8                 | <b>Meter Re-Connection or Reset.</b>   |                      |                      |                        |                          |
| E9                 | <b>Temporary Power.</b> Install temporary power to a distribution panel. (Note: Max. 600V or max. 225A.)   |                      |                      |                        |                          |
| E10                | <b>Temporary Power and Electrical Wiring.</b> Install temporary power to a distribution panel. Include installation of electrical wiring for [check one box] <input type="checkbox"/> construction site, <input type="checkbox"/> special event, <input type="checkbox"/> carnival, <input type="checkbox"/> trade show, or <input type="checkbox"/> movie set. (Note: Max. 600V or max. 225A.)  |                      |                      |                        |                          |
| E11                | <b>New Electrical Service.</b> Install new [specify capacity] _____ electrical service only. (Note: Max. 600V or max. 225A.)   |                      |                      |                        |                          |
| E12                | <b>New or Replace Electrical Subpanel.</b> Install [check one box] <input type="checkbox"/> new or <input type="checkbox"/> replace existing electrical subpanel. Total connected load shall not exceed 400A. (Note: Max. 600V or max 225A.)   |                      |                      |                        |                          |
| E13                | <b>New Electrical Vehicle Charging Station and Supply Equipment.</b> Install [check one box] <input type="checkbox"/> one or <input type="checkbox"/> two EVCS with [check one box] <input type="checkbox"/> Level 1 or <input type="checkbox"/> Level 2 [check one box] <input type="checkbox"/> 15A, <input type="checkbox"/> 20A, <input type="checkbox"/> 30A, <input type="checkbox"/> 40A, <input type="checkbox"/> 50A, or <input type="checkbox"/> 70A rated EVSE located at [specify location] _____. [check if included] <input type="checkbox"/> including a panel upgrade. Comply with Information Bulletin <a href="#">IB-049</a> Permit Process for EVCS and <a href="#">FORM-019</a> .                      |                      |                      |                        |                          |
| E14                | <b>New Electrical Vehicle Charging Station and Supply Equipment.</b> Install [check one box] <input type="checkbox"/> one or <input type="checkbox"/> two EVCS with [check one box] <input type="checkbox"/> Level 1 or <input type="checkbox"/> Level 2 [check one box] <input type="checkbox"/> 15A, <input type="checkbox"/> 20A, <input type="checkbox"/> 30A, <input type="checkbox"/> 40A, <input type="checkbox"/> 50A, or <input type="checkbox"/> 70A rated EVSE located at [specify location] _____. Comply with Information Bulletin <a href="#">IB-049</a> Permit Process for EVCS and [specify form] <input type="checkbox"/> <a href="#">FORM-037</a> or <input type="checkbox"/> <a href="#">FORM-038</a> . |                      |                      |                        |                          |

**FOOTNOTE:**

1. Comply with all mandatory feature energy requirement contained in the 2019 Edition of the California Building Energy Efficiency Standards, CCR Title 24, Part 6 (a.k.a., California Energy Code).

Refer to Information Bulletin [IB-058](#) for additional information on simple construction projects that qualify for the Express Permit Service. If it does not qualify, it will be necessary to submit the construction documents for plan review through the Over-the-Counter Plan Review Service or the Submitted Regular Plan Review process. Refer to [longbeach.gov/lbds/building/plan-review-service](http://longbeach.gov/lbds/building/plan-review-service) for additional information.

To request this information in an alternative format or to request a reasonable accommodation, please contact the Development Services Department at [longbeach.gov/lbds](http://longbeach.gov/lbds) and 562.570.3807. A minimum of three business days is requested to ensure availability; attempts will be made to accommodate requests with shorter notice.