

CITY OF TARPON SPRINGS, FLORIDA  
DEVELOPMENT SERVICES DEPARTMENT

DATE STAMP

REQUEST FOR PRE-POWER

Please print or type

Building Name: \_\_\_\_\_  
Permit Number: \_\_\_\_\_  
Parcel Number: \_\_\_\_\_  
Street Address: \_\_\_\_\_



Pursuant to Section 108.3 of the Florida Building Code, the undersigned hereby request temporary electrical power to the above described property. In consideration of approval of this request we hereby acknowledge and agree as follows:

1. No use or occupancy of the structure is authorized by this approval.
2. Temporary power shall only be authorized for a period of time not to exceed 60 days.
  - a. Only the Building Official can approve an extension. All requests for an extension must be made in writing to the Building Official stating the reason for the request.
3. The Building Official shall be authorized to order Duke Energy to disconnect the temporary electrical power when, in the opinion of the Building Official;
  - a. Work on the project has ceased, or
  - b. The building permit expires, or
  - c. The building is used or occupied for any purpose other than construction related activity.
4. Release and hold harmless the City of Tarpon Springs and its employees from all liabilities and claims of any kind which may arise now or in the future from this request, including any damage which may be incurred due to the disconnection of electrical power in the event of violation of this agreement.
5. Violations of any of the terms and conditions herein shall result in the immediate termination of temporary power.

As witness by our signatures below, we hereby agree to abide by all terms and conditions of this agreement.

Electrical Contractor: \_\_\_\_\_  
Signature \_\_\_\_\_ Print or Type Name \_\_\_\_\_

EC License Number: \_\_\_\_\_ Company: \_\_\_\_\_

General Contractor: \_\_\_\_\_  
Signature \_\_\_\_\_ Print or Type Name \_\_\_\_\_

GC License Number: \_\_\_\_\_ Company: \_\_\_\_\_

Property Owner: \_\_\_\_\_  
Signature \_\_\_\_\_ Print or Type Name \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY**

APPROVED: \_\_\_\_ YES \_\_\_\_ NO EXPIRES: \_\_\_\_\_  
Date

BY: \_\_\_\_\_  
ANTHONY MASTRACCHIO Date

RELEASE OF POWER BY: (PLEASE PRINT)

\_\_\_\_\_  
City Employee Date Time Duke Energy Employee