



Please refer to our website or contact a Regional Office to locate the BC Safety Authority office nearest you.

<b>Coquitlam</b> 604-927-2041 fax 604-927-2047	<b>Kamloops</b> 250-314-6000 fax 250-377-4406
<b>Kelowna</b> 250-861-7313 fax 250-861-7349	<b>Langley</b> 604-539-3573 fax 604-539-3570
<b>Nanaimo</b> 250-716-5200 fax 250-716-5212	<b>Prince George</b> 250-614-9972 fax 250 614 9949
<b>Victoria</b> 250-952-4444 fax 250-952-4458	

**New Westminster** 505 - 6th Street, Suite 200, New Westminster, BC, V3L 0E1 **Website:** [www.safetyauthority.ca](http://www.safetyauthority.ca)

**Local Phone:** 778-396-2000 **fax** 778-396-2174 **Toll Free:** 1-866-566-SAFE (7233) **fax** 1-888-660-3508

### ELECTRICAL HOMEOWNER INSPECTION REQUEST FORM

**Note:** The information on this form is collected to administer the provisions of the *Safety Standards Act*. If you have questions about the collection, use or disclosure of this information, contact the Records, Information & Privacy Analyst at 1-866-566-SAFE (7233).

Daytime telephone number: (    )	Permit number: (not valid unless permit number is shown)
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**A. Homeowner**

Homeowner name:				
Mailing address: Suite no.:	Street no.:	Street name:	Street type:	N/E/S/W:
City:		Province:		Postal Code:
Installation site name:				
Installation site: Street no.:		Street name:		Street type: N/E/S/W:
City:				

**B. To the Safety Officer of the regulatory authority having jurisdiction**

I hereby declare that I am the registered owner of the residential dwelling described herein, and that the electrical installation authorized under permit is ready for inspection as follows:

The rough wiring is now ready for inspection  
 The installation is ready for connection of power to the electrical supply  
 Non-compliances have been corrected and are ready for re-inspection  
 All work covered by this permit has been completed and is ready for final inspection  
 Work in progress - safety inspection (6 months)

Please note:

1. Identify property and/or residential dwelling by house or lot number as applicable.
2. Provide access to the residential dwelling.
3. In rural areas, provide a sketch map showing location of residence or property in area below.
4. For special instructions, please use area below, or attach notes.

Notes: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Permission is granted for a Safety Officer to enter the residential dwelling, site/location/premises.	Date: YYYY   MM   DD
Homeowners signature: _____	

Forward completed form to the nearest BC Safety Authority Office