



Home Owner Electrical Permit Application Questionnaire

Name:	Date	Permit Number: (provided by BCSA)
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To be completed by the homeowner, as a first level assessment:

1. Are you the registered owner of the premises/home? Yes No
2. Is this premises/home a fully detached single family dwelling, garage or pool shed located on a similar property? Yes No
3. Does a strata council manage the premises/home? Yes No
4. Is the premises/home or any part of, a rental or going to be rented in the near future? Yes No
5. Will any part of this building be used for commercial purposes or personal income? Yes No
6. Except for garages, shops, vacation homes, or other outbuildings, will you be living in or intending to live in this premises? Yes No
7. Will anyone assist you with this work?
If Yes, provide the name(s) and/or qualifications on permit application. Yes No
8. Will you be compensating any individual for assistance with this work? Yes No
9. Have you performed previous electrical installations through the homeowner permit process? Yes No
10. Will this home be listed for sale within 30 days of completion of all work? Yes No

BCSA Staff Initials: _____ Permit Holder Initials: _____ Date: _____