Electric Utilization permit

Format No.
Rev. No.
Rev. Date.

Date: _____ Application Department _____

Electrical Utilization applicant Name_____ Designation _____

Application for location _____ Area_____

Reason for use_____

Working Voltage _____ Electric equipment & power _____

Electrical user _____ Safety monitor _____

#	Safety Measures	Verify Y / N	Requirements

Location Reviewed by_____ **Sign**_____

Remarks by maintenance Manager

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Maintenance Supervisor **Sign** **Maintenance Manager** **Sign**

Health & safety Reviews _____

Reviewed by_____ **Sign** _____

Completed: YES / NO Complete Time _____

Final Note _____

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Electrical Engineer **Sign** **Electrical Manager** **Sign**