



Planning Department

420 Howanut Road., P.O. Box 536., Oakville WA 98568

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<https://www.chehalistribe.org/departments/planning-department-about-us/>

Non-Refundable administration fees are due upon submitting application.



Electrical Permit Application

Administration Fee: \$50

Contact Information

Applicant Name: _____ Electrical Business Name: _____
Address: _____ City: _____ St: _____ Zip: _____
Phone: _____ Email: _____
Property Owner: _____
Property Address: _____ City: _____ St: _____ Zip: _____
Location or dept. within the property address (Kitchen, Planning Dept. etc.): _____

Type of Electrical Work

☐ Commercial ☐ Single-Family or Duplex ☐ Multi-Family ☐ Industrial/Manufacturing

Description of Work

Please Check All That Apply:

☐ New building- Amps: _____	☐ Addition- Amps: _____	☐ Limited Voltage
☐ Service Change- Amps: _____	☐ Circuits: () New () Existing	☐ Solar Panel/Circuits
☐ Tenant Improvement	☐ Illuminated Sign	
☐ Temporary Power- Amps: _____	☐ Pool/Spa/Hot Tub	

Details of work: _____

Current Business License? ☐ Yes ☐ No

(If not, vendor(s) must purchase one prior to work.)

ACKNOWLEDGEMENT TO BE COMPLETED BY SOLE OWNER OR PRINCIPLE OFFICER

I certify that the statements made in this application are true. **I understand that my business, including employees representing my business, must comply with the Chehalis Tribal Code, any applicable Federal laws and Planning Department Regulations while working within the boundaries of the Chehalis Reservation. Failure to comply can result in fines or revocation of the business license and/or permits.** Any permit granted hereunder may be revoked with notice or formal hearing by the Planning Department or Business Committee upon their finding that an application has provided false information for a permit application or has violated any regulation of this ordinance. I understand that it is my responsibility to ensure all vendors have a current valid Tribal Business License prior to conducting any further business on the Chehalis Reservation.

Please be prepared to show your current state contractor's license.
48-hr. notification is required for inspections.

Printed Name: _____

Date: _____

Signature: _____