

City of Athens Building Department
815 North Jackson Street
P.O. Box 849
Athens, TN 37371-0849



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City of Athens
Nonstandard Electrical Inspection Fee

Customer: _____ Date: _____

Construction Address: _____

Electrical Contractor: _____ Registration #: _____

Type of Occupancy: Commercial Industrial Number of Floors: _____

| | <u>Size</u> | <u>Number of Services</u> |
|------------------------------|-------------|---------------------------|
| Size and Number of Services: | 1) _____ | _____ |
| | 2) _____ | _____ |
| | 3) _____ | _____ |
| | 4) _____ | _____ |
| | 5) _____ | _____ |

Person authorized to request inspections: _____

FEES

Service Entrance Inspection _____ @ \$175 = \$ _____
Rough-in Inspections _____ @ \$ 35 = \$ _____
Occupancy Final _____ @ \$ 75 = \$ _____
Final Inspection _____ @ \$350 = \$ _____

TOTAL NONSTANDARD FEE \$ _____

It is mutually confirmed by the Contractor and Inspector, as evidenced by the signatures below, that the fees and inspections itemized above are acceptable to both parties. It is further understood that this agreement is not valid until signed by both parties.

Contractor

Electrical Inspector

Date

Date