## ELECTRIFICATION

All appliances are electric except: [modify as applicable]

* Cooktop
* Pool heater
* Spa heater
* Outdoor barbeque
* Outdoor fireplace

## Verification

This form has been completed by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name) of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(company), the qualified [specify credentials based on local practice, e.g., architect, engineer, project manager] individual for the above listed project who verifies that it accurately represents the project plans. [modify based on local verification requirements]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

RESERVED FOR USE BY BUILDING DEPARTMENT

* Approved as Submitted
* Approved as Marked Up
* Denied

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Plan Checker Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name Plan Checker