



City of Burnaby

Building Department
4949 Canada Way, Burnaby, BC V5G 1M2
Phone: 604-294-7130 Fax: 604-294-7986
www.burnaby.ca/building

ELECTRICAL ANNUAL OPERATING PERMIT INSPECTION REQUEST FORM

Name OF FSR:		Site Name:	
Phone Number:		Site Address:	
FSR Number:		Operating Permit Number:	

To: Electrical Inspection Division of the Burnaby Building Department

I, the FSR named on the above operating permit, have physically inspected the electrical installation described below and hereby certify that the electrical installation has been installed to comply with the BC Safety Standards Act, Current BC Electrical Code and City Bylaws.

Date worked started: _____

Date work completed: _____

Description of work (specify location of work):

- Rough wiring complete
- All work has been completed
- Deficiencies of _____ have been corrected.

Signature: _____

Date: _____

Date Accepted: _____

Signed _____
(Electrical Safety Officer)