Permit	No.	-



911 VERIFICATION AND RELEASE PERMIT

P.O. Box 808 Centerville, TX 75833 (903) 536-3158 Office (903) 536-1021 Fax

Email: Floodplain.911Addressing@co.leon.tx.us

Name of Owner:	Phone:		
Mailing Address:	_City & Zip:		
Name of Applicant:	Phone:		
Relationship to Owner:			
Mailing Address:	_City & Zip:		
911 Address (if different):			
This electrical connection will serve: (Please check all	that apply)		
Existing ResidenceNew Construction	Other (Please describe)		
(Please check electric provider and enter Account or ESI Numb	per)		
□ Oncor # (ESI)			
Navasota Valley Electric Coop #			
□ Houston County Electric Coop #			
□ Entergy #			
Name on Electrical Billing Account:			
PLEASE READ!	\$30.00 fee due at time of application.		
I, \square as owner or \square applicant having authority to act on be applying, I am stating that I will install an electrical serving regulations that will meet their inspection guide, and I her my property at the above address for the purpose of lot evant the statements and information contained herein are trubelief.	vice in compliance with current state and county elines. My valid, correct 911 address is eby authorize Leon County officials to enter upon aluation and inspection of the electrical system(s).		
or			
Signature of Owner	Signature of Applicant		
FOR OFFICE USE ONLY:			
□ Oncor □ Navasota Valley Electric Coop			
CONF# DATE ISSUED: CASH/CHECK NO: DATE PAID:			

Floodplain Determination: [] NO SFHA [] Partial Flood Zone [] FLOOD ZONE