

Self-Certification Program Electrical Peer Review Certificate

This form must be completed by a city-approved electrical peer reviewer for any Self-Certification project subject to random audit where the electrical scope includes work that is greater than 400 amps or greater than 22,000 amps available fault current (AFC)

Project Name:				
Project Address:				
Lot #: B	sldg #:	Floor:	Suite/Space:	
Scope of Work:				
Electrical Engineer of Record Information	<u>1</u>			
Name:	Compa	any Name:		
Address:	City: _	State:	Zip Code:	
Phone #:	Fax: _			
AZ License #:	Email:			
Electrical Engineer of Record Signature:		Date:		
Electrical Peer Reviewer Information Name:	Compa	any Name:		
Address:	City: _	State:	Zip Code:	
Phone #:	Fax: _			
AZ License #:	Email:			
I hereby certify the following information:				
 I have reviewed the electrical portion of are complete and in accordance with all any applicable state or federal laws, as of 	applicable provisi			
• I have participated in city-sponsored trai	=		•	
 I have exercised a professional standard Official of the city of Phoenix will rely up a building permit. 				
Electrical Peer Reviewer Signature:		Date:		
	04-41 11	N	luitet - I -	
	Staff USE C	niy	initials:	

For more information or for a copy of this publication in an alternate format, contact Planning & Development at 602-262-7811 voice or TTY use 7-1-1.

Page 1 of 1