



Lamar Consolidated Independent School District

Personal Appliance Permit Application

Date: _____

Campus: _____

Name of Applicant: _____

Room: _____

- Small Refrigerator* \$45
Make/Model _____

*Energy Star Rated, and no larger than 2.7 cubic feet

- Other Small Appliance** \$45
Make/Model _____

**Appliance must be UL rated. Approval from Principal/Director and Energy Coordinator

Total Permit Fee \$ _____

Applicant Signature Date

Principal/Director Signature Date

*Applicant will complete this request.*Campus principal or appropriate director's actual signature is required.*Application and payment is submitted to the Energy Coordinator who will issue a receipt and permit to the applicant.*Permit is good for the current school year in which application is received.*Permits must be renewed annually.

***Payment is by Check or Cashier's Check. Make checks payable to Lamar CISD. No Cash will be accepted.**

For Energy Office Only

Approved: _____ School Year: _____ Permit No.: _____

Denied: _____ Reason: _____

Payment Received: Yes No Check Number: _____

Energy Coordinator Date