

APPLICATION FOR BUILDING AND/OR ELECTRICAL PERMIT

Page 1 of _____

Municipality _____ County _____ Tax Parcel _____
 Construction Site Address _____ Date Received _____
 Permit Applicant: _____ Owner _____
 Address: _____ Address _____
 Telephone: _____ State _____ Zip _____ Phone# _____
 Email: _____ Describe proposed work in detail _____

Signature _____ Owner ☐ Authorized Agent ☐

Date: _____

Applicant certifies that the information contained herein is true and correct and that the applicant will comply with the PA Uniform Construction Code and all other federal, state, and municipal laws and ordinances.

State Classification: New Commercial _____ Other Commercial _____ New Residential _____ Other Residential _____

BUILDING PERMIT # _____	ELECTRICAL PERMIT # _____																																																						
Contractor _____ (if owner, put same name above)	Contractor _____ (if owner, put same name above)																																																						
Address _____	Address _____																																																						
City _____ State _____ Zip _____	City _____ State _____ Zip _____																																																						
Phone _____ Cell _____	Phone _____ Cell _____																																																						
Fed Employee No. _____ (Certificate of Insurance for Workers Compensation needed or signed exemption form)	Fed Employee No. _____ (Certificate of Insurance for Workers Compensation needed or signed exemption form)																																																						
Estimate of total costs for all work _____	Estimate of total costs for all work _____																																																						
Total square feet: _____ Use Group _____ Type Construction _____																																																							
No. of Stories: _____ Height of Structure _____																																																							
Type of work: Alterations/Additions of: _____ Square Ft. _____ () Roofing - Total square feet _____ () Fencing, supply height if it exceeds 6 foot _____ () Sign - Total Square feet _____ () Pool - Total Square feet _____ () Decks - Total Square feet _____ () Demolition - Total Square feet _____ () Accessibility _____ Other: _____	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Quantity</th> <th style="text-align: left;">Size</th> <th style="text-align: left;">Items</th> </tr> </thead> <tbody> <tr><td>_____</td><td></td><td>Lighting Fixtures</td></tr> <tr><td>_____</td><td></td><td>Receptacles</td></tr> <tr><td>_____</td><td></td><td>Switches</td></tr> <tr><td>_____</td><td></td><td>Detectors</td></tr> <tr><td>_____</td><td>HP _____</td><td>Motor-Fractional</td></tr> <tr><td>_____</td><td></td><td>Communication Devices</td></tr> <tr><td>_____</td><td></td><td>Alarm Devices/Systems</td></tr> <tr><td>_____</td><td></td><td>Emergency & Exit Lights</td></tr> <tr><td>_____</td><td></td><td>Pool Bonding</td></tr> <tr><td>_____</td><td></td><td>Service</td></tr> <tr><td>_____</td><td></td><td>Sub-Panels</td></tr> <tr><td>_____</td><td></td><td>Feeders</td></tr> <tr><td>_____</td><td></td><td>Baseboard Heater</td></tr> <tr><td>_____</td><td></td><td>Dryer Receptacle</td></tr> <tr><td>_____</td><td>Range _____</td><td>Dishwasher _____</td></tr> <tr><td>_____</td><td>Heater _____</td><td>Garbage Disposal _____</td></tr> <tr><td>_____</td><td></td><td>Central A/C Units</td></tr> </tbody> </table>	Quantity	Size	Items	_____		Lighting Fixtures	_____		Receptacles	_____		Switches	_____		Detectors	_____	HP _____	Motor-Fractional	_____		Communication Devices	_____		Alarm Devices/Systems	_____		Emergency & Exit Lights	_____		Pool Bonding	_____		Service	_____		Sub-Panels	_____		Feeders	_____		Baseboard Heater	_____		Dryer Receptacle	_____	Range _____	Dishwasher _____	_____	Heater _____	Garbage Disposal _____	_____		Central A/C Units
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