



**CITY OF WAUPACA  
DEPARTMENT OF INSPECTION  
111 S. MAIN STREET  
WAUPACA, WI 54981  
PHONE: 715-942-9908 · FAX: 715-258-4426**

## APPLICATION FOR ELECTRICAL PERMIT

DATE: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_ PARCEL NO: \_\_\_\_\_

OCCUPANCY:  1-FAMILY     2-FAMILY     MULTI-FAMILY     COMMERCIAL     ACCESSORY  
DESCRIPTION:  NEW     ADDITION     ALTERATION     SERVICE     CODE CORRECTION

Number	Type of Work	Number	Type of Work
	Openings for switches		Post lights
	Openings for receptacles		Spot/flood lights
	Fixtures (interior)		Central air
	Fixtures (exterior)		Furnace
	Fluorescent fixtures		Boiler
	Range		Electric heating units
	Dishwasher		Water heater
	Garbage disposal		Signs
	Microwave		Motors
	Fans (exhaust)		Subfeeders #6AWG or larger
	Fans (ceiling/paddle)		
	Washer		
	Dryer		
Service _____ A U/G or O/H			
Other: _____			

State approved plan required?  Yes     No    Project Cost: \$ \_\_\_\_\_  
Transaction ID # \_\_\_\_\_ Site ID # \_\_\_\_\_

Delinquent Permits: Failure to obtain an electrical permit prior to the start of a project results in double the regular permit fee.

Inspections: Minimum 2-business days' notice must be given to arrange for inspection.

In consideration of the issuance of the permit the applicant agrees to faithfully comply with all laws and regulations of the State of Wisconsin and of the Ordinances of the City of Waupaca.

NAME OF CONTRACTOR/INSTALLER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

MASTER ELECTRICIAN LICENSE #: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

ELECTRICAL CONTRACTOR LICENSE #: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

ELECTRICIAN/APPLICANT'S SIGNATURE: \_\_\_\_\_