



**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: _____