

SALEM TOWNSHIP ELECTRICAL PERMIT APPLICATION

APPLICATION FEE - \$50.00 plus Third Party Inspection Fee (to be determined)

JOB LOCATION

STREET # _____ STREET NAME _____
 LOT # _____ BUILDING _____ FLOOR _____ SUITE _____
 SUBDIVISION _____
 TENANT'S NAME _____
 EMAIL _____ CONTACT ID _____

OWNER INFORMATION

OWNER TENANT

NAME _____ CONTACT ID _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 TELEPHONE _____ EMAIL _____

CONTRACTOR INFORMATION

SAME AS OWNER

COMPANY NAME _____ CONTACT ID _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 TELEPHONE _____ EMAIL _____
 STATE CONTRACTOR'S LICENSE # _____ COUNTY BPOL # _____

APPLICANT

NAME _____ CONTACT ID _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 TELEPHONE _____ EMAIL _____

LIST NUMBER OF FIXTURES TO BE INSTALLED. SEE REVERSE SIDE OF FORM FOR ADDITIONAL INFORMATION ON FILLING OUT APPLICATION

RESIDENTIAL FIXTURES / EQUIPMENT : NEW				REPLACEMENT							
Qty.	Description	Rating	Qty.	Description	Rating	Qty.	Description	Rating	Qty.	Description	Rating
_____	New Residential Service	_____	_____	Baseboard Heat	_____	_____	Fan Coil Unit	_____	_____	UPS System - KVA	_____
_____	Service	_____	_____	Unit Heater	_____	_____	Furnace (Electric)	_____	_____	UPS System - KVA	_____
_____	Temporary/Permanent	_____	_____	Attic Fan	_____	_____	Furnace (Gas/Oil)	_____	_____	Water Heater	_____
_____	Temporary/Construction	_____	_____	Ceiling Fan	_____	_____	Heating Equipment	_____	_____	Other - HP	_____
_____	Sub Panel	_____	_____	Central Vacuum	_____	_____	Heating Equipment	_____	_____	Other - HP	_____
_____	Sub Panel	_____	_____	Generator - KW	_____	_____	Heat Pump	_____	_____	Other - KW	_____
_____	Sub Panel	_____	_____	Hot Tub Pump-HP	_____	_____	Compactor	_____	_____	Other - KW	_____
_____	Sub Meter	_____	_____	Hydro Tub Pump-HP	_____	_____	Cooktop	_____	_____	Oven	_____
_____	Circuits	_____	_____	Motor - HP	_____	_____	Dishwasher	_____	_____	Range	_____
_____	Fixtures	_____	_____	Sump Pump - HP	_____	_____	Disposal	_____	_____	Smoke Detector	_____
_____	Air Cleaner	_____	_____	Transformer - KVA	_____	_____	Dryer	_____	_____		_____
_____	Air Conditioner	_____	_____	Transformer - KVA	_____	_____	Humidifier	_____	_____		_____

COMMERCIAL FIXTURES / EQUIPMENT: NEW				REPLACEMENT							
Qty.	Description	Rating	Qty.	Description	Rating	Qty.	Description	Rating	Qty.	Description	Rating
_____	Circuits	_____	_____	Sub-Panel/Sub-Meter	_____	_____	Motor - HP	_____	_____	Compactor - HP	_____
_____	Fixtures	_____	_____	Sub-Panel/Sub-Meter	_____	_____	Motor - HP	_____	_____	Dishwasher - HP	_____
_____	Service	_____	_____	Sub-Panel/Sub-Meter	_____	_____	Motor - HP	_____	_____	Dishwasher - HP	_____
_____	Service	_____	_____	Low Voltage - Fire Alarm	_____	_____	Motor - HP	_____	_____	Disposal - HP	_____
_____	Service	_____	_____	Low Voltage - Security	_____	_____	Transformer - KVA	_____	_____	Disposal - HP	_____
_____	Temporary/Construction	_____	_____	Low Voltage - Voice/Data	_____	_____	Transformer - KVA	_____	_____	Oven - KW	_____
_____	Temporary/Construction	_____	_____	Low Voltage - Other	_____	_____	Transformer - KVA	_____	_____	Oven - KW	_____
_____	Temporary/Permanent	_____	_____	Systems Furniture Circuits	_____	_____	UPS System - KVA	_____	_____	Range - KW	_____
_____	Temporary/Permanent	_____	_____	New Residential Service	_____	_____	UPS System - KVA	_____	_____	Range - KW	_____
_____	Temporary/Permanent	_____	_____	New Residential Service	_____	_____	UPS System - KVA	_____	_____		_____

COMMERCIAL - HVAC / PUMPS: NEW				REPLACEMENT				COMMERCIAL - SIGNS / MISC: NEW				REPLACEMENT			
Qty.	Description	Rating	Qty.	Description	Rating	Qty.	Description	Rating	Qty.	Description	Rating	Qty.	Description	Rating	
_____	Air Conditioner-HP	_____	_____	Furnace (Gas/Oil)-KW	_____	_____	Cooktop	_____	_____	Dryer-kw	_____	_____	Sub-Panel/Meter	_____	
_____	Air Conditioner-HP	_____	_____	Furnace (Gas/Oil)-KW	_____	_____	Hot Tub Pump-HP	_____	_____	Dryer-kw	_____	_____	Motor-hp	_____	
_____	Air Conditioner-HP	_____	_____	Heat Pump-KW	_____	_____	Hot Tub Pump-HP	_____	_____	Generator-kw	_____	_____	Transformer-kva	_____	
_____	Air Conditioner-HP	_____	_____	Heat Pump-KW	_____	_____	Hydro Tub Pump-HP	_____	_____	Generator-kw	_____	_____	UPS System-kva	_____	
_____	Air Conditioner-HP	_____	_____	Heat Pump-KW	_____	_____	Hydro Tub Pump-HP	_____	_____	Generator-kw	_____	_____	Carnival/Fair/Circus	_____	
_____	Air Handler-HP	_____	_____	Heat Pump-KW	_____	_____	Sump Pump-HP	_____	_____	Generator-kw	_____	_____	Central Vacuum	_____	
_____	Air Handler-HP	_____	_____	Heat Pump-KW	_____	_____	Sump Pump-HP	_____	_____	Water Heater-kw	_____	_____	Dental Chair	_____	
_____	Air Handler-HP	_____	_____	Heating Equipment-KW	_____	_____	Other Pump-HP	_____	_____	Water Heater-kw	_____	_____	Ext. Light Poles	_____	
_____	Air Handler-HP	_____	_____	Heating Equipment-KW	_____	_____	Other Pump-HP	_____	_____	Water Heater-kw	_____	_____	Gasoline Dispenser	_____	
_____	Air Handler-HP	_____	_____	Heating Equipment-KW	_____	_____	Other Pump-HP	_____	_____	Water Heater-kw	_____	_____	Sign -fluorescent # tubes	_____	
_____	Ceiling Fan-HP	_____	_____	Heating Equipment-KW	_____	_____	Other Pump-HP	_____	_____	Other-kw	_____	_____	Sign-incandescent	_____	
_____	Ceiling Fan-HP	_____	_____	Heating Equipment-KW	_____	_____	Compressor-HP	_____	_____	Other-kw	_____	_____	Sign-neon transformers	_____	
_____	Baseboard Heat-KW	_____	_____	Air Cleaner	_____	_____	Compressor-HP	_____	_____	Service	_____	_____	Smoke Detector	_____	
_____	Baseboard Heat-KW	_____	_____	Fan Coil Unit	_____	_____	Other-HP	_____	_____	Temp/Permanent	_____	_____	Temp Wiring-Tents/Stands	_____	
_____	Furnace Electric-KW	_____	_____	Humidifier	_____	_____	Other-HP	_____	_____	Sub-Panel/Meter	_____	_____	Welder	_____	
_____	Furnace Electric-KW	_____	_____	Unit Heater	_____	_____		_____	_____	Sub-Panel/Meter	_____	_____	X-Ray Equipment	_____	

Project Description

Provide detailed description of all work being completed on this property.

Number of Units _____

If more than one unit, describe work to completed in each unit.

Equipment Listed

The equipment listed on this application is not inclusive of all working requiring the issuance of a permit. Rather, it is a listing of the work most commonly requested on this type of permit application. If the work to be performed is not listed on the application, write in the equipment to be installed or the work to be performed in the space provided. Indicate if the wire is overhead or underground. If underground, provide depth and type of conduit. Please attach sheets as needed if additional room is required. Three sets of the plans shall be submitted with this application.

Inspection Requirements.

The permit holder is responsible for scheduling required inspections and for assuring that final approvals are received prior to use of the building, structure or part thereof, as required by the Pennsylvania Uniform Construction Code.

Cost of Construction: _____

PPL Work Number: _____

APPLICANT AGREEMENT

I hereby certify that I have authority to make this application, that the information is complete and correct, and that the work performed and equipment installed will conform to the Pennsylvania Uniform Construction Code and the National Electrical Code.

Signature of Owner or Agent

Date

Please print name and title