



Borough of Wilkinsburg Code Enforcement

Municipal Building
605 Ross Avenue
Wilkinsburg, PA 15221

Phone: (412) 244-2923 • Fax: (412) 244-2922

ELECTRICAL PERMIT APPLICATION

In accordance with Chapter 141 of Borough Code of Ordinances

APPLICATION DATE: _____ PERMIT # _____

Contractor Name _____ Primary Phone # _____

Address _____ City _____ State _____ Zip _____

Contact Person _____ E-mail _____

Site Location Address _____

Commercial Residential

Lot & Block _____ Subdivision _____

Property Owner's Name _____ Primary Phone # _____

(If Owner differs from Applicant)

Property Owner Address _____ E-mail _____

If Applicant differs from Property Owner, Please provide Property Owner authorization:

- Application Type:** New Service System extension or alteration
 New Sub Panel Sign lighting
 New Wiring Site Lighting
 Underground service, conductors or feeders
 Repair Temporary Service

INSPECTION ONLY (NO PERMIT) Reconnect Service Inspection

(IF INSPECTION FAILS A PERMIT WILL BE NEEDED FOR REPAIRS)

Type of work to be done (check all that apply)

- New Construction Alteration and/or extension of system
 Equipment Replacement with higher amperage Equipment Replacement with same amperage
 Repair existing

CONTRACTOR INFORMATION

Business Name: _____ State Cont. Reg. #: _____

Name: _____ Phone #: _____

Address: _____ Fax #: _____

City/State/Zip: _____ E-mail: _____

PA ONE CALL SERIAL # _____

Construction Details

Electrical Systems

Number of services _____ size of services _____ Feeder Size _____

Number of lineal feet of underground conductors or feeders _____

Number of receptacle and lighting outlets _____

Subpanels _____ Transformers _____ Motors _____

Installation includes low voltage wiring or systems. Explain _____

Installation includes smoke detectors _____

Electrical system is located in a Hazardous location as defined by the International Building Code or National Electric Code

Installation requires explosion proof devices

Description of Work: _____

Fees

- | | |
|--|-------------|
| <input type="checkbox"/> Application fee | \$60.00 |
| <input type="checkbox"/> UCC fee | \$4.50 |
| <input type="checkbox"/> Plans review | \$10.00 |
| <input type="checkbox"/> Reconnect /Service Inspection | No Charge |
| <input type="checkbox"/> Third Party Review | TBC |
| Residential Inspection | \$71.00 ea. |
| Commercial Inspection | \$100.00 ea |

Please print clearly. Illegible and incomplete forms will not be accepted. Please remit payment with this application. For Corporations, a form of identification of an authorized officer of the company, or copy of a written agreement of the corporation's registered agent is required.

WORKERS' COMPENSATION ADDENDUM

(Required to be attached to all building permit applications)

Part 1

The Applicant for the permit, in compliance with Act 44 of 1993, hereby submits, *(check one)*:

- Certificate of Insurance OR Certificate of Self-Insurance Listing the Borough of Wilkinsburg and our Third Party (Must Attach)
- Affidavit of Exemption

Part 2

Basis and Affidavit of Exemption

- Applicant is an Individual who owns the property
- Contractor/Applicant is a sole proprietorship without employees
- Contractor/Applicant is a corporation, and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Worker's Compensation Act.
- All of the Contractor/Applicant's employees on the project are exempt-on religious grounds under Section 304.2 of the Worker's Compensation Act.
- Other: Please explain: _____

My signature on behalf of or as the Contractor/Applicant for this permit constitutes my varication that the statements contained herein are true, and that I am subject to the penalties of 18 Pa. C.S.A. 4904 relating to unsworn falsification to authorities.

Applicant Signature

Print Name: _____

Signature: _____ Date: _____

For Office Use Only

Permit Number _____

Fee Paid \$ _____

Approved By: _____ Date: _____

Title: _____