



OAK CREEK WISCONSIN

CITY OF OAK CREEK
8040 S. 6th STREET • OAK CREEK, WI 53154
PHONE (414) 766-7002

ELECTRICAL CONTRACTOR PERMIT APPLICATION

Permit No.

Parcel No.

The undersigned hereby makes application for a permit for the execution of electrical installation for light, heat or power as hereafter described.

Project Address:

Electrical Contractor's Business Name

Business Email

Electrical Contractor's Mailing Address, City, State & Zip

Licensee Name

Master License Number

(Exp. Date)

State Electrical Contractor License Number

(Exp. Date)

Phone

Property Owner's Name:

Property Owner's Email

Property Owner's Mailing Address, City, State & Zip (if different from Project Address)

Property Owner's Phone

Use: Residential Commercial or (Specify)

Type: New Const. Added rooms /Areas New Occupancy Remodel / Alter

NOTE: INCOMPLETE APPLICATION WILL NOT BE PROCESSED! Circle, check or specify type as needed for all appropriate line items above and below on this application AND provide a complete description of work indicating all rooms, locations, areas, etc. the items below are being installed or serviced!

DESCRIPTION OF WORK PERFORMED:

ITEMS / EQUIPMENT

QTY Rate of fee FEES

Table with 5 columns: Item Number, Description, QTY, Rate of fee, FEES. Contains 32 rows of electrical equipment and services.

I hereby certify that I have read and examined this application and know the same to be true and correct. It is hereby agreed, between the undersigned and the City of Oak Creek, that for and in consideration of the electrical permit to be issued and granted; that the electrical installation described in this application will be installed or altered in strict compliance with the current issue of the National Electrical Code adopted by the State of Wisconsin under SPS 316, and all amendments thereto; to obey all lawful orders of the City of Oak Creek; and to install all electrical equipment as described in this Permit Application in a safe, legal and workmanlike manner.

TOTAL AMOUNT: \$

MINIMUM 24-HOUR NOTICE IS REQUIRED FOR ALL INSPECTION REQUESTS. SCHEDULING WILL BE BASED ON ORDER RECEIVED AND STAFF AVAILABILITY.

MASTER ELECTRICIAN SIGNATURE:

DATE: