



ELECTRIC SERVICE

1. PROPERTY INFORMATION

Municipality: _____ Parcel ID: _____

Site Address: _____

2. ELECTRICAL SERVICE:

RESIDENTIAL

COMMERCIAL

New Service

Temporary Service

Disconnect / Reconnect

Feeder / Subpanel

Single Phase

3 Phase

Overhead

Underground

Other

Description: _____

Amperage: _____

Work Order#: _____

3. PROPERTY OWNER

Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

4. BILLING ADDRESS

Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

5. INSTALLER / ELECTRICIAN

Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

I certify that I am the owner of the property or an authorized agent of the owner for which this application has been filed. I hereby certify that all statements contained above are, to the best of my knowledge, true and correct. I further understand that I must comply with the provisions of all laws and ordinances as adopted by the Municipality and the Unified Construction Code of Pennsylvania.

Applicants Signature: _____

Date: _____

Received by: _____

Date: _____

Permit No. _____