



115 BUEHLER LANE,
PAUPAK, PA 18451
PH: 570-226-2230

APPLICATION FOR ELECTRICAL PERMIT

ELECTRICIAN

PROPERTY OWNER

Name: _____
Address: _____
Phone: _____
Fax: _____
Email: _____
Pa Contractor License # _____

PIN# _____
Name: _____
Address: _____
Phone: _____
Fax: _____
Email: _____

Job Address: _____
Tenant: _____
Bldg: _____

Has a building permit been issued for this project? Y N If Yes, Building Permit # _____

Describe scope of work being performed for which a permit is requested:

Rough Wiring: _____ Lights: _____ Electric Signs: _____
Switches: _____ Reintroduction of Power: _____
Fire Alarm Devices: _____ Recep: _____ Signaling Systems: _____
Swimming Pool: _____ Transformers: _____
Above Ground: _____ Backup Generator: _____ Feeders & Sub Panels: _____
In Ground: _____ Fuel Type: _____ Service & Meter Eq: _____
Temporary Service: _____ AMPS: _____
Solar: _____

Cost of Electrical Improvement: _____

Electrician Printed Name

Property Owner Name of Agent or Owner

Signature

Signature

TO SCHEDULE AN INSPECTION, VISIT
SFMCONSULTINGLLC.ORG/SCHEDULE-AN-INSPECTION
OR CALL INSPECTION AGENCY:
DAVE MANTER
570-350-9171 PHONE 877-424-8079 FAX
dwanter@ptd.net

OFFICE USE ONLY

DATE ISSUED _____

PERMIT # _____

PAID _____

APROVED BY _____