



Kennett Square Borough
 120 Marshall Street
 Kennett Square, PA 19348
 Phone: (610) 444.6020 Fax: (610) 444.3216

ELECTRICAL PERMIT APPLICATION

*All electrical work is to conform to the National Electrical Code.
 Plans are required for all electrical work exceeding \$2,000.*

ADDRESS OF JOB SITE: _____

Is this a result of a violation notice: No Yes

Use of Premises: _____

Name of third party inspection agency to be used: _____

PROPERTY OWNER'S NAME: _____

Street Address: _____ City: _____

State: _____ Zip Code: _____ Phone No.: _____

CONTRACTOR'S NAME: _____ License No.: _____

Street Address: _____ City: _____

State: _____ Zip Code: _____ Phone No.: _____

CHECK ALL THAT APPLY:

- | | | | |
|---|---|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> ALTERATION | <input type="checkbox"/> GAS BURNING EQUIP. | <input type="checkbox"/> 1 FAMILY | <input type="checkbox"/> PUBLIC BLDG. |
| <input type="checkbox"/> REPAIR | <input type="checkbox"/> OIL BURNING EQUIP. | <input type="checkbox"/> 2 FAMILY | <input type="checkbox"/> COMMERCIAL |
| <input type="checkbox"/> NEW CONSTRUCTION | <input type="checkbox"/> AIR CONDITIONING | <input type="checkbox"/> 3 FAMILY | <input type="checkbox"/> OTHER: _____ |
| <input type="checkbox"/> REPLACEMENT | <input type="checkbox"/> ELECTRIC HEAT | <input type="checkbox"/> APT. BLDG. | |

DESCRIBE TYPE OF ELECTRICAL WORK TO BE PERFORMED:

ESTIMATED COST OF JOB: _____

APPLICANT'S SIGNATURE: _____ **DATE:** _____

***PROPERTY OWNER'S SIGNATURE:** _____ **DATE:** _____

***REQUIRED**

-OFFICE USE ONLY-

PERMIT NO.: _____ **PARCEL NO.:** _____

FEE: _____ **DATE PAID:** _____

APPROVED BY: _____ **DATE:** _____