

ELECTRICAL PERMIT APPLICATION

Sinking Spring Borough

Permit #: _____

3940 Penn Avenue

Sinking Spring PA 19608

Date: _____

Phone: 610-678-4903 Fax: 610-678-5802

Owner:					
Address:	Contractors/Applicant Name:				
Address:					
Owner Phone No.:			Contractors Phone No.:		
Owner Cell No.:			Contractors Cell No.:		
Location of Work:					
Type of Building:	Residential	Commercial			Industrial
Used As:					
Type of Work: (check one)	New	Addition	Alteration	Repair	Other
Total Cost of Electrical Work:					
Fixture:	Quantity:				
Panel Size					
Sub Feeder Size					
Motors					
Ranges					
Air Heaters					
Baseboards					
Dryer					
Water Heater					
Ceiling Fans					
Ceiling Outlets					
Switches					
Plug Receptacles					

