

Permit  
# \_\_\_\_\_

**WEST PIKELAND TOWNSHIP**  
P. O. BOX 6  
1645 ART SCHOOL ROAD  
CHESTER SPRINGS, PA. 19425  
PHONE: (610)827-7660 FAX: (610)827-9241

Permit Fees  
Mid Atlantic Insp. Fee  
\$ \_\_\_\_\_  
Township Fee \$ \_\_\_\_\_  
Total Fee \$ \_\_\_\_\_

**APPLICATION FOR ELECTRICAL PERMIT**

NOTE: Additional information, plans and specifications may be required for larger projects

SITE LOCATION: \_\_\_\_\_

USE OF PREMISES: \_\_\_\_\_

***TO SCHEDULE ALL ELECTRICAL INSPECTIONS please call MIDDLE ATLANTIC INSPECTIONS  
1-800-732-2551 OR 1-302-266-9057***

NAME OF INSTALLER: \_\_\_\_\_ Reg. # \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE # \_\_\_\_\_ FAX # \_\_\_\_\_ CELL # \_\_\_\_\_

- |                                                     |                                                |
|-----------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> 1 & 2 family               | <input type="checkbox"/> Air Conditioning      |
| <input type="checkbox"/> Apt. Building              | <input type="checkbox"/> Oil Burning Equipment |
| <input type="checkbox"/> Public/Commercial Building | <input type="checkbox"/> Heater Conversion     |
| <input type="checkbox"/> New Construction           | <input type="checkbox"/> Electric Heat         |
| <input type="checkbox"/> Addition                   | <input type="checkbox"/> Lighting              |
| <input type="checkbox"/> Alteration                 | <input type="checkbox"/> Pool/Spa              |
| <input type="checkbox"/> Repair                     | <input type="checkbox"/> Other _____           |
| <input type="checkbox"/> Replacement                | <input type="checkbox"/> Total Outlets         |
|                                                     | <input type="checkbox"/> Total Circuits        |

Description of Electrical work and size of work: \_\_\_\_\_

I DO HEREBY CERTIFY THAT THE STATEMENT HEREIN ARE TRUE AND TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Applicant Print Name \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Date: \_\_\_\_\_

Date \_\_\_\_\_

Approved by E.I. \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Approved by B.C.O. \_\_\_\_\_

Print Name: \_\_\_\_\_

*Issuance of this permit is contingent upon all work being completed in compliance with the 2003 International Electrical Code including supplements and any other applicable Township Regulations.*