Lower Alsace Township

1200 Carsonia Avenue Reading PA 19606 Phone (610) 779-6400 Fax (610) 370-0797



Code Enforcement Department	
Permit Number:	

APPLICATION FOR ELECTRICAL PERMIT

Rev Jan 2024

PART A: TO BE COMPLETED BY OWNER / APPLICANT								
Name of Property Owner:			Address:					
Home Phone No.:	Mobile Phone No.:		Email Address:					
Name of Contractor:			Address:					
Phone No:	Mobile Phone No.:		Email Address:					
Thone No.	Widdlie i fidlie No		Liliali Address.					
Property Location:								
APPLICATION BEING M	ADE EOD THE EOLIO	MING						
APPLICATION BEING IVI	ADE FOR THE POLLO	wing.						
Hear	Residential	Commercial	Industrial	Other				
Use: Type of Installation:	New	Alteration	Repair	Other	Amperage:			
Service:	Overhead	Underground			Phase:			
Service.	Overnead				riiase.			
			Job #		Estimated Project Cost:	\$		
DESCRIPTION OF SCOPE	E OF WORK:							
STATEMENT BY APPL	ICANT, OWNER, ar	nd/or OWNFR'S A	GFNT:					
OTATIONE TO THE TENT	ichitti, o iviteli, al	ia, or ouritain or	CLIVII.					
I hereby certify that I am the OWNER or AGENT of the OWNER, that I am authorized to make this application and that the information contained in this application is accurate to the best of my knowledge. Further, I / we agree to adhere to all applicable Lower Alsace Township Ordinances and Regulations. I / we are also aware that a USE & OCCUPANCY PERMIT, issued by Lower Alsace Township shall be required								
prior to use or occupancy of the buildir		rdinances and Regulations. 17 we	e are also aware that a USE &	OCCUPANCY	PERIVITI, ISSUED by Lower Alsace	ownsnip snaii be required		
prior to use or occupancy of the building	g or structure.							
Signature of Applicar	nt:				Date:			
9								
Signature of Property	Owner/Agent:				Date:			
2.6								

It is the Property Owner's responsibility to comply with imposed restrictions. Permits will be issued to Electrical Contractors who present a valid Electrical Contractor License after having successfully passed an examination from another municipality or jurisdiction recognized by the Township of Lower Alsace as well as a Certificate of Insurance establishing that the contractor is currently insured by a reputable insurance company acceptable to the Township of Lower Alsace covering said contractor for property damages in the amount of not less than \$50,000 for any one claim, and not less than \$100,000 for multiple claims arising from the same undertaking, as well as public liability insurance in the amount of not less than \$100,000 from any one claim and not less than \$300,000 for more than one claim arising from the same undertaking; certificate shall also be present proof of Worker's Compensation Insurance or an affidavit that Worker's Compensation Insurance as not required.

PART B: TO BE COMPLETED BY CODE OFFICER							
Application is:	Approved	Denied					
Reason for Denial:							
Code Officer Signatu	ure:	Date:					
Service Inspection:	\$	Paid by:					
Final Inspection:	\$	Method of Payment:					
Rough Inspection:	\$	- dymene:					
Re-Inspection:	\$	Check No.:					
State UCC Charge:	\$	Date Paid:					
		Total Paid: \$					
TOTAL DUE:	\$						