

# Commercial Electrical Permit-Town of Neenah

Owners name \_\_\_\_\_ Phone \_\_\_\_\_

Project address \_\_\_\_\_

Contractors name \_\_\_\_\_ Phone \_\_\_\_\_

Contractors address \_\_\_\_\_ Fax #: \_\_\_\_\_

Type of occupancy \_\_\_\_\_

Job description \_\_\_\_\_

Project total cost \$ \_\_\_\_\_

New construction \_\_\_\_\_ Main panel \_\_\_\_\_ Single phase \_\_\_\_\_

Additional areas \_\_\_\_\_ No. of Circuits \_\_\_\_\_ Three phase \_\_\_\_\_

Service change \_\_\_\_\_ No. of outlets \_\_\_\_\_ Three wire \_\_\_\_\_

Rewire existing \_\_\_\_\_ No. of sub-panels \_\_\_\_\_ Four wire \_\_\_\_\_

Overhead \_\_\_\_\_ No. of service panels \_\_\_\_\_ Amperage \_\_\_\_\_

Underground \_\_\_\_\_ No. of meters \_\_\_\_\_ Voltage \_\_\_\_\_

Building square foot \_\_\_\_\_ Times \$.02 = \$ \_\_\_\_\_ Plus \$35.00 Base fee = \$ \_\_\_\_\_

Owner/Contractor \_\_\_\_\_ Date \_\_\_\_\_

Inspector \_\_\_\_\_ Date \_\_\_\_\_

Payable to: Town of Neenah, Mail to: Gary Klinka, 228 Mandella CT Neenah, WI 54956.

Phone: 920-727-9200 or Fax 888-727-5704

- All work to meet the State Codes or reinspection fees will be charged for improper installations.
- The owner/contractor is responsible for making arrangements for the final inspection.