

# CRITERIUM<sup>®</sup> PETERS ENGINEERS

If you have questions while filling out this permit application, please contact our office: 570-752-8044 or toll-free: (877) 752-4123.

## ELECTRICAL PERMIT

Municipality \_\_\_\_\_ County \_\_\_\_\_ Lot# \_\_\_\_\_ Block \_\_\_\_\_ Tax Parcel \_\_\_\_\_

Construction Site Location \_\_\_\_\_ Date Received \_\_\_\_\_

<b>Owner</b> _____			
Address _____			
City _____	State _____	Zip _____	
Phone _____			

<b>Tenant</b> _____			
Address _____			
City _____	State _____	Zip _____	
Phone _____			

Front Yard \_\_\_\_\_ ft. (front of building to property line)

Rear Yard \_\_\_\_\_ ft. (rear of building to property line)

Side Yard \_\_\_\_\_ ft. Side Yard \_\_\_\_\_ ft.

Describe proposed work in detail: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**State Classification:**  New Commercial  Other Commercial  New Residential  Other Residential

Contractor _____	
<i>(if owner, put same name above)</i>	
Address _____	
City _____	State _____ Zip _____
Phone _____	Cell _____
Fed. Employee No. _____	
<i>(Certificate of Insurance for Workers Compensation needed or sign exemption form)</i>	
Estimate of total cost for all work _____	

I hereby acknowledge that I have read this application and state the above is correct to comply with all Municipal ordinances and state laws regarding construction.

Signature: \_\_\_\_\_  
 Owner  Contractor  Owner Representative

BUILDING CODE OFFICIAL USE ONLY	
Plans Approved _____	Plans Approved with Comments _____
UCC Building Fee _____	Plan Review Fee _____
Admin. Fee _____	State Fee _____
Total Cost _____	Code Official _____
State Cert# _____	Date Issued _____

Technical Site Data No.	Size	Items
		Lighting Fixtures
		Receptacles
		Switches
		Detectors
	HP	Motor-Fractional
		Communication Devices
		Alarm Devices/Systems
		Emergency & Exit Lights
		Pool Bonding
		Service
		Sub-Panels
		Feeders
		Baseboard Heater
		Dryer Receptacle
		Signs
Others _____		

Range  Dishwasher  Garbage Disposal  Heater  
 Central A/C Units