

CRITERIUM[®] 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 _____

Owner _____	
Address _____	
City _____	State _____ Zip _____
Phone _____	Email: _____

Tenant _____	
Address _____	
City _____	State _____ Zip _____
Phone _____	

Zoning Permit Issued Yes No

Zoning Permit Issue Date _____

Please Include a Copy of Zoning Permit

Inspection Requests Require 48-Hour Notice-No Exceptions. Please Call 570-752-4433 to Schedule

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 _____	

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 _____		

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 _____

Certification # _____ Total Cost _____

Code Official _____ Date Issued _____

- Range Dishwasher Garbage Disposal Heater
 Central A/C Units