

EAST ROCKHILL TOWNSHIP

1622 North Ridge Road, Perkasie, Pennsylvania 18944

Phone: 215-257-9156 • Email: contact@EastRockhillTownship.org • Website: EastRockhillTownship.org



Inspections by Electrical Underwriting Agency
Code Inspections 215-672-9400 or contact@codeinspections.net

ELECTRIC PERMIT APPLICATION

SITE / CONTACT INFORMATION:

SITE ADDRESS Street and City: _____		Primary Contact (check one)
Bucks County Tax Map Parcel ID: _____ USE: <input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential		
Property Owner	Name _____	<input type="checkbox"/>
	Address _____	
	Phone _____ Email _____	
Applicant	Name _____	<input type="checkbox"/>
	Address _____	
	Phone _____ Email _____	

PROPOSED:

Type of Work (check one): Installing <input type="checkbox"/> New Equipment Altering Existing <input type="checkbox"/> System <input type="checkbox"/> Both	Wire Type: _____ Size: _____ Circuit Load: _____	# of Hardwired Motors: Electrical Devices: _____ # of HP or KW: _____	Electrical Service: _____ Amps Check one: <input type="checkbox"/> New <input type="checkbox"/> Upgrade
Pool Bonding: <input type="checkbox"/> Yes <input type="checkbox"/> No		Cost: \$ _____	
Switching Outlets	Bonding, Pool/Vault		Size & KW
Lighting Outlets	Service/Feeders	Motors	Qty
Receptacle Outlets	HVAC Equipment	Generators	
Range/Oven	Switching Devices	Compressors	
Dryer, Electric	Transformers	Solar Panels	
Water Heater, Electric	Alarm Devices	If altering existing system, explain:	
Heat Detectors	Annunciator Panel		
Smoke Detectors	Other: _____		

I hereby certify that I am the owner of record of the named property or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

Signature of Owner **Required**

Signature of Authorized Agent

TO BE COMPLETED BY EAST ROCKHILL TOWNSHIP

Electric Fee Received Yes No \$ _____
 PA UCC Fee Received Yes No \$6.00
 Payment Method Credit Card Check No. _____ Total \$ _____
 Generator requires zoning review. Application Received Yes No Fee Received: \$ _____
 Contractor Certificate of Insurance Yes No Expires _____

Building Code Official

Approved Denied

Date

Received Stamp Via Mail
In Person
Drop Box