

APPLICATION FOR ELECTRICAL PERMIT
Wayne County Building Department
 428 West Liberty Street • Wooster, Ohio 44691
 330-287-5525 • 330-287-5649 fax

PERMIT # _____

<input type="radio"/>	RESIDENTIAL
<input type="radio"/>	COMMERCIAL



PARCEL
TOWNSHIP
SECTION
LOT NO.

PROJECT DESCRIPTION:	
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JOB LOCATION ADDRESS:		CITY:	
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POWER COMPANY:	<input type="radio"/> Ohio Edison WORK # _____	<input type="radio"/> AEP	<input type="radio"/> H/W	<input type="radio"/> ORRVILLE	<input type="radio"/> WADS	<input type="radio"/> LMRE
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PROPERTY OWNER:		PHONE:		EMAIL:			
ADDRESS:		CITY:		STATE:		ZIP:	
TENANT NAME:		TENANT PHONE:					

CONTRACTOR NAME:		OHIO LIC. #					
ADDRESS:							
CITY:		STATE:		ZIP:		CELL PHONE:	
EMAIL (PLEASE PROVIDE)		PHONE:					

EQUIPMENT INSTALLED: MARK ALL APPROPRIATE BOXES THAT APPLY.

SERVICE: _____ AMP/SIZE	ELECTRICAL EQUIPMENT or WIRING:			
<input type="radio"/> New Permanent Service	<input type="radio"/> Temporary Service	<input type="radio"/> Access Building SQ FT _____	<input type="radio"/> Swimming Pool	
<input type="radio"/> Service Upgrade	<input type="radio"/> Ag Service	<input type="radio"/> New/Attached SQ FT _____	<input type="radio"/> Sign	
<input type="radio"/> Service Repair	<input type="radio"/> Overhead	<input type="radio"/> Rewire SQ FT _____	<input type="radio"/> Generator	
<input type="radio"/> Service Reconnect	<input type="radio"/> Underground	<input type="radio"/> Other SQ FT _____	<input type="radio"/> Solar	<input type="radio"/> Roof <input type="radio"/> Ground

<p>PLEASE SIGN AND DATE</p> <p>DATE _____</p> <p>SIGNATURE _____</p> <p align="center">Applicant, Agent, Owner</p> <p>The applicant, agent, owner of this building and the undersigned is/does (1) agree to conform to applicable laws of the County Building Dept. and State of Ohio, (2) responsible to verify that the job location is in the jurisdiction of the County Building Dept. and if the job location is out of jurisdiction, NO refund will be issued, (3) the address is correct, (4) responsible for making arrangements for all inspections, (5) GENERAL CONTRACTOR SHALL NOTIFY UTILITY COMPANIES INVOLVED IN THE SITE NO MORE THAN TEN DAYS AND NO LESS THAN 48 HOURS IN ADVANCE OF EXCAVATION (ORC 3781.28). CALL BEFORE YOU DIG – OUPS 1-800-362-2764.</p> <p>PAYMENT INFORMATION:</p> <table border="1"> <tr> <td>CHECK</td> <td>Approval Date: _____</td> </tr> <tr> <td>CASH</td> <td>Issued By: _____</td> </tr> <tr> <td>CARD</td> <td></td> </tr> </table> <p>No final inspection will be given until ALL fees have been paid.</p>	CHECK	Approval Date: _____	CASH	Issued By: _____	CARD		<p align="center">PLEASE DO NOT WRITE BELOW THIS LINE.</p> <table border="1"> <tr> <td>BASE FEE/SQ FT</td> <td>\$ _____</td> </tr> <tr> <td>OTHER FEES</td> <td>\$ _____</td> </tr> <tr> <td></td> <td>\$ _____</td> </tr> <tr> <td></td> <td>\$ _____</td> </tr> <tr> <td></td> <td>\$ _____</td> </tr> <tr> <td>INITIAL PLAN REVIEW</td> <td>\$ _____</td> </tr> <tr> <td>RESUBMITTAL</td> <td>\$ _____</td> </tr> <tr> <td>RESUBMITTAL REVIEW</td> <td>\$ _____</td> </tr> <tr> <td></td> <td>\$ _____</td> </tr> <tr> <td>SUBTOTAL</td> <td>\$ _____</td> </tr> <tr> <td>1% OR 3%</td> <td>\$ _____</td> </tr> <tr> <td>TOTAL</td> <td>\$ _____</td> </tr> </table>	BASE FEE/SQ FT	\$ _____	OTHER FEES	\$ _____		\$ _____		\$ _____		\$ _____	INITIAL PLAN REVIEW	\$ _____	RESUBMITTAL	\$ _____	RESUBMITTAL REVIEW	\$ _____		\$ _____	SUBTOTAL	\$ _____	1% OR 3%	\$ _____	TOTAL	\$ _____
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