



City of Port Washington
Department of Building Inspection

100 West Grand Avenue
Port Washington, Wisconsin 53074
262-284-2600 Fax 262-284-7669

Building Permit Application

Electrical Permit

Job Location <i>(identify exact address)</i>		Zoning	Permit #
Owner's Name	Phone Number	Contact's Name <i>(When Relevant)</i>	Phone Number
Owner's Address <i>(If different from above)</i>		City	State Zip Code
Electrical Contractor's Name	License Number	Contact's Name	Phone Number
Contractor's Address		City	State Zip Code

It is the responsibility of permit holder to arrange for appointment times when entry is available for the required inspections.
If the inspector cannot access work site or if work is not visible, a reinspection fees will be charged.

Use of Building	Type of Work	Item	Size	Qty	Fee	Amt.
<input type="checkbox"/> Residential	<input type="checkbox"/> New	Built-ins			6.00	
<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Addition	Clothes Dryer			6.00	
<input type="checkbox"/> Commercial	<input type="checkbox"/> Alteration / Repair	Dishwasher			6.00	
Other _____		Electric Heating			1.00 / kw	
Additional Information _____ _____ _____ _____ _____ _____		Fans, exhaust and vent			3.00	
		Feeder or Sub-feeder (sub Panel)			6.00	
		Fixtures: Medium Base			.55 ea.	
		Fuel Dispensing Pumps			15.00/unit	
		Garbage Disposal			6.00	
		Generator, Transformer, Rectifiers or similar devices			1.00 / kw	
		Heating unit and motor			6.00	
		Hot Tub, Whirlpool, Spa, etc.			6.00	
		Lamps: Tubular			.40 ea.	
		Low voltage Systems (Intercom, bells, etc.)			1.00 ea.	
		Motors			6.00	
		Neon Lights: Per Transformer			3.00	
		Outlets			.55 ea.	
		Power Receptacle			6.00	
		Range			6.00	
	Refrigeration units, air conditioner and air cooling units			15.00/unit		
	Service – Temporary & up to 600 amp Plus 10.00 / every 100 amp over 600 amp	Size		20.00		
	Signs, internally lighted			20.00		
	Sump pumps			2.50		
	Swimming Pools			25.00		
	Water Heater			6.00		
	Wire ways, Busways, Under-floor raceways			.50 / ft		
Approved By _____ Date _____		Minimum Permit Fee			25.00	
		Reinspection Fee			25.00	

I attest that the above information accurately describes the property and proposed work to be performed on it. I agree to comply with all City Of Port Washington and State of Wisconsin codes applicable to the occupancy and work stated above. I understand that any falsification or misinformation may result in penalties prescribed in the City of Port Washington ordinances.

Permit Fee

Applicants Signature

Date

DO NOT FAX COMPLETED PERMIT APPLICATION

If returning application by mail, include 3 copies. If a copy of issued permit is needed include a stamped addressed envelope or fax number.