



Permit No. \_\_\_\_\_

**BOROUGH OF TOPTON**  
205 South Callowhill Street  
Topton, PA 19562  
610-682-2541  
610-682-1636 Fax

**ELECTRICAL PERMIT APPLICATION**

Applicant Print Name \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Telephone No. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Location of Work \_\_\_\_\_

Owner (Print) \_\_\_\_\_

Owner's Signature \_\_\_\_\_ Telephone No. \_\_\_\_\_

Address \_\_\_\_\_ Pin # \_\_\_\_\_ District \_\_\_\_\_

**TYPE OF CONSTRUCTION**

New \_\_\_\_ Alteration \_\_\_\_ Repair \_\_\_\_ Addition \_\_\_\_ (circle one)

Description of Work \_\_\_\_\_

\_\_\_\_\_

Total Number of fixtures (switches, outlets, light fixtures) \_\_\_\_\_

Cost of Electrical Improvements \_\_\_\_\_

Power Company \_\_\_\_\_ AMP Service \_\_\_\_\_ Sub Panels \_\_\_\_\_

**INSPECTORS ONLY**

Notified Power Co. \_\_\_\_\_ Cut in Card # \_\_\_\_\_ Job # \_\_\_\_\_

FOR INSPECTORS USE ONLY

Receptacles			Disposal		
Switches			Hood		
Lights			Dish Washer		
Ex Fans			Dryer		
GFI			Heat Pump		
Paddle Fans			Water Heater		
Smoke Detector			Well Pump		
Range			AG Pool		
IG Pool			Spa		

Permit Approved \_\_\_\_\_ Disapproved \_\_\_\_\_ Permit Fee \_\_\_\_\_

Comments

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**ELECTRICAL PERMIT PROCEDURES**

An electrical permit is required for all new construction including all renovations and alterations.

- Address must be provided on all applications
- All information must be completed
- If property resident is not the owner of the property, a notarized statement indicating the owner’s approval of the proposed construction must be submitted with the application. Provide phone numbers where property owner may be reached.
- 3 copies of all plans and specifications must be submitted with all applications for electrical permits.
- Work may not start until a permit has been approved.
- A current **Certificate of Insurance for Workman’s Compensation** must be submitted with this application.
- Call Great Valley Consultants at 1-800-733-4821 for electrical inspections.