Penalty Fee: _____

Date: _____

Property Number:

Permit #: _____

CITY OF HARRISBURG ELECTRICAL PERMIT Bureau of Codes Administration

	Location of Building:		
No Stre	et	No. Units	Owner's Name:
Owner's Phone #		_Owner's Email:	

Contractor's Information (Please include City, State & Zip Code)

Name:		Electrical License No:		
Address:		Phone #:		
		Inspection Agency:		
		Business Privilege & Mercantile License #:		
Type of Improvement: New	Alteratio	n 🗆 Repair 🗖 Addition 🗖 Residential		
🗖 Mult	ti-Unit Residential	Non-Residential Commercial/Industrial		
Item	No. of Items	Comments		
Ceiling Outlets (s)				
Switches				
Plug Receptacle (s)				
GFI Receptacle (s)				
Laundry Circuit				
Smoke Detector (s)				
Range Circuit				
Kitchen Circuit				
Water Heater				
Lighting Circuit (s)				
Furnace Circuit (s)				
Air Conditioner				
Complete Rewire				
New Service (100 Amp, 200 Amp)				
Minimal Code Requirements				
Other				
NOTICE: A replacement of any n requirements adopted by the City of F		he electrical system will require the property to be brought up to the minimum co		
Estimated Completion Date:/	/	Estimated Cost: \$ Permit Fee:		
		rk is authorized by the owner of record and that they have been authorized by the new field of the second second to all applicable laws of this jurisdiction.		

 Contractor Signature
 Approved by

 Date
 Title