

YEADON BOROUGH



APPLICATION FOR ELECTRICAL PERMIT

Yeadon Office
Church Lane & Bailly Road
P.O. Box 5187, Yeadon, PA 19050
610-284-3110 • Fax 610-284-2138

PERMIT NO. _____

IMPORTANT – Applicant to complete all items in sections: I, II, III, and IV.

I. LOCATION OF BUILDING

AT (LOCATION) _____ ZONING DISTRICT _____
(NO.) (STREET)
BETWEEN _____ AND _____
(CROSS STREET) (CROSS STREET)
SUBDIVISION _____ LOT _____ BLOCK _____
LOT SIZE _____

II. TYPE AND COST OF BUILDING – All applicants complete Parts A - D

A. TYPE OF IMPROVEMENT

- 1 ☐ New building
- 2 ☐ Addition (If residential, enter number of new housing units added, if any, in Part D, 13)
- 3 ☐ Alteration (See 2 above)
- 4 ☐ Repair, replacement
- 5 ☐ Fence
- 6 ☐ Decks
- 7 ☐ Porch

B. OWNERSHIP

- 8 ☐ Private
(Individual, corporation, non-profit institution, etc.)
- 9 ☐ Public (Federal, State, or local government)

C. COST

(Omit cents)

10. Other TOTAL COST OF IMPROVEMENT \$ _____
\$ _____
\$ _____
\$ _____

D. PROPOSED USE – For "Wrecking" most recent use

Residential

- 12 ☐ One or two family
- 13 ☐ Two or more family – Enter number of units _____
- 14 ☐ Garage
- 15 ☐ Day Care
- 16 ☐ Other – Specify _____

Non-residential

- 17 ☐ Amusement, recreational
- 18 ☐ Church, other religious
- 19 ☐ Industrial
- 20 ☐ Parking garage
- 21 ☐ Service station, repair garage
- 22 ☐ Hospital, institutional
- 23 ☐ Office, bank, professional

- 24 ☐ Public utility
- 25 ☐ School, library, other educational
- 26 ☐ Stores, mercantile
- 27 ☐ Tanks, towers
- 28 ☐ Other – Specify _____

☐ Existing Building

Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant.
If use of existing building is being changed, enter proposed use.

III. SELECTED CHARACTERISTICS OF BUILDING

E. PRINCIPAL TYPE OF FRAME

- 29 ☐ Masonry (wall bearing)
- 30 ☐ Wood frame
- 31 ☐ Structural steel
- 32 ☐ Reinforced concrete
- 33 ☐ Other – Specify _____

F. DIMENSIONS

- 34 Number of stories _____
- 35 Total square feet of floor area, all floors, based on exterior dimensions _____
- 36 Total land area, sq. ft. _____

(OVER)

Date _____

ELECTRICAL PERMIT APPLICATION							
TOTAL SERVICE AMPS		NUMBER OF SERVICE OUTLETS TO BE INSTALLED		110 V		220 V	
NO. OF CIRCUITS TO BE INSTALLED		2 WIRE		3 WIRE		4 WIRE	
NO. OF GFI'S TO BE INSTALLED							
ROOMS	NO.	OUTLET TYPE	ROOMS	NO.	OUTLET TYPE		
1			7				
2			8				
3			9				
4			10				
5			11				
6			12				
THIRD PARTY INSPECTION AGENCY							

DESCRIPTION OF WORK

IV. IDENTIFICATION – To be completed by all applicants					
Name		Mailing address - Number, Street, City, and State		Zip Code	Tel. No.
1. Owner or Lessee				Builder's License No.	
2. Contractor				Builder's License No.	
3. Architect or Engineer				Builder's License No.	
I hereby certify 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 authorized agent and we agree to conform to all applicable laws of this jurisdiction.					
Signature of applicant		Address			Application date