

TOWN OF WESTPORT  
COMMERCIAL ELECTRICAL PERMIT

Date \_\_\_\_\_ Permit# \_\_\_\_\_

Owner of Property \_\_\_\_\_

Address of Property \_\_\_\_\_

Electrical Contractor \_\_\_\_\_  
License # \_\_\_\_\_

I, the undersigned, as the Electrical Contractor certify that all electrical work will be done in compliance with the National Electrical Code and the State of Wisconsin Electrical Code.

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

E-Mail \_\_\_\_\_ Signed \_\_\_\_\_

Brief description of work \_\_\_\_\_

Service: \_\_\_ Underground \_\_\_ Overhead \_\_\_\_\_ Amperage

Temporary Service: \_\_\_ Underground \_\_\_ Overhead \_\_\_\_\_ Amperage

Temporary Service Insp. \_\_\_\_\_ \$70.00

SERVICE: \$15.00 per 100 amps \_\_\_\_\_ \$ \_\_\_\_\_

CIRCUITS:	10 - 30 amp @ \$4.00 each	_____	\$ _____
	31 - 60 amp @ \$10.00 each	_____	\$ _____
	61 - 100 amp @ \$15.00 each	_____	\$ _____
	101 - 200 amp @ \$25.00 each	_____	\$ _____
	201 - 400 amp @ \$40.00 each	_____	\$ _____

Rough Inspection trip (each)-----\$50.00----- \$ \_\_\_\_\_

Service Inspection trip -----\$70.00----- \$ \_\_\_\_\_

Final Inspection trip (each) -----\$50.00----- \$ \_\_\_\_\_

Extra Inspection trips (each) -----\$50.00----- \$ \_\_\_\_\_

If Occupied BEFORE Final Insp. \$50.00----- \$ \_\_\_\_\_

Make checks payable to: TOWN OF WESTPORT TOTAL: \$ \_\_\_\_\_  
and send to: Jeff Hoag, 409 S. Walker Way, Sun Prairie, WI 53590 (Ph. (608) 825-6403)

-----office use only below this line-----

Service Insp.: \_\_\_\_\_ Sent: \_\_\_\_\_ Rough Insp.: \_\_\_\_\_

Temp. Service Insp.: \_\_\_\_\_ Sent: \_\_\_\_\_ Final Insp.: \_\_\_\_\_

Fees paid: \_\_\_\_\_ Extra Insp's.: \_\_\_\_\_