

**Susquehanna Township**

1900 Linglestown Road  
Harrisburg, PA 17110  
717-545-4751

[www.susquehannatwp.com](http://www.susquehannatwp.com)

Parcel ID	
Bldg. Permit #	
Elect. Permit #	
Date Rcvd.	

**ELECTRICAL PERMIT APPLICATION****Location of Building**

Street Address: \_\_\_\_\_ No. of Units: \_\_\_\_\_

**Type of Improvement:** ☐ New ☐ Alteration ☐ Repair ☐ Addition  
☐ Residential ☐ Multi-Unit Residential ☐ Non-Residential

**Owner's Information**

Owner's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_

**Contractor's Information**

Contractor's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_

**3<sup>rd</sup> Party Inspection Agency:** \_\_\_\_\_ **Estimated Completion Date:** \_\_\_\_\_

**Note:** A 3<sup>rd</sup> party inspector is required to inspect the electrical work as outlined below. The Township does not perform electrical inspections.

Item	Number Of Items	Comments
Ceiling Outlet(s)		
Switches		
Plug Receptacle(s)		
GFI Receptacle(s)		
Laundry Circuit		
Smoke Detector(s)		
Range Circuit		
Kitchen Circuit		
Water Heater(s)		
Lighting Circuit(s)		
Furnace Circuit(s)		
Air Conditioner		
Photovoltaic		
Complete Rewire		
Service Distribution Panel		
New Service _____ Amps		<input type="checkbox"/> Overhead <input type="checkbox"/> Underground

The undersigned hereby certifies that the proposed work is authorized by the owner of record and that they have been authorized by the owner to make this applicant as an authorized agent and does hereby agree to conform to all applicable laws of the jurisdiction and the state of Pennsylvania for the work for which this permit is issued.

Signature of Authorized Representative \_\_\_\_\_ Date \_\_\_\_\_ Signature of Building Code Official \_\_\_\_\_

<b>FEES</b>	Permit Fee: \$25.00	State Surcharge: \$4.50	<b>Total Fee: \$29.50</b>
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