

## Electrical Permit Application

Village of Wales
Building Inspector
P.O. Box 47
129 West Main Street
Wales, WI 53183
Phone (262) 490-8222
Fax (262) 968-5649

CALL FOR INSPECTIONS: (262) 490-8222

			Permit #		
			Building Perr	nit #	
Name	ame Telephone Number				
Address					
Contractor		Telephone Number _			
Address					
Project Location (Bu	ilding Address)				
Project Description		Commerci	alOr	ne & Two-Family	
Estimated Cost	Lic	ense Number			
	SCHEDULE OF INSPECTION FEES	EACH	COUNT	FEE	
NEW BUILDING	Base Fee				
	Plus	•	Sq. Ft		
		For All Areas			
	REPLACMENT, MODIFICATIONS				
. Light, switch, and con		.50			
2. Power receptacle ove	r 150 volts, fist 30 amps	8.00			
Over 30 amps 3. Lighting fixtures – inca	andoccont	6.00 .40			
I. Tubular lamp, such as		.25			
	floodlight, HID light pole base and poles	3.00			
	d temporary wiring installation	25.00			
7. Service switch, each of	or alteration thereof: First 200 amperes	25.00			
	itional per 100 amps or fraction thereof	15.00/100 amps.			
	nd raceway – per 100 ampere capacity, or fraction thereof	8.00/100 amps.			
	o 5 HP plus 1.00 per HP over 5	6.00			
	ers, oil burner, electrical furnace 5 ton Plus 1.00 per ton over 5 ton	5.50 6.00			
	and air conditioning unit up to 5 ton	10.00			
2. Combination neating	Over 5 ton	20.00			
3. Range, oven, clothes	dryer dishwasher, disposal, water heater	6.50			
4. Each motor, per HP of	or fraction thereof	.50/HP - 1.00 Min			
	, fuel oil, permanent vending machines, and well pump	7.00			
	former, reactor, rectifier, capacitor, welder, converter and electric furnace				
	levice (including remote Thermostat)	4.00			
8. Dimmer and rheostat	s ctrical wiring and grounding)	2.00 40.00			
		15.00			
20. Sign – Fluorescent, neon, or incandescent 21. Strip lighting, plug-in strip, trolley duct wire way, gutter		.50 ft.			
	tric signal or communication device	1.00			
23. Fans – Bath – Paddle and miscellaneous under 1HP		1.00			
24. Hydro Massage & Hot Tubs		40.00			
25. Photo cell, clocks, smoke detectors		1.00			
26. Fire alarm system, exit lighting system		15.00			
27. Approved assemblies Not included above and others 28. Sanitary Ejector/Grinder Pump & Control Box		25.00			
	der Pump & Control Box	35.00			
29. Other (Specify)	Permit Fee\$35	25.00			
	tion Fee\$25				
	call for inspection\$25				

## DOUBLE FEES ARE DUE IF WORK STARTED BEFORE PERMIT IS ISSUED

The applicant agrees to comply with the Municipal Ordinances and with the conditions of this permit; understands that the issuance of the permit creates no legal liability, expressed or implied, of the Department, Municipality, Agency, or Inspector; and certifies that all the above information is accurate. Have Permit/Application number and address when requesting inspections. Give at least 24 hours notice on all inspections.

SIGNATURE OF APPLICANT	DAT	Έ

FEES	RECEIPT	PERMIT EXPIRATION:	PERMIT ISSUED BY MUNICIPAL AGENT:
Inspection Fee	Ck # Date From	PERMIT EXPIRES 90 DAYS FROM DATE UNLESS OTHERWISE NOTED BELOW	NAME DATE
NO REFUNDS ON PERMITS	Rec. By		CERTIFICATION NO