GLEN OSBORNE BOROUGH
P.O. Box 97, Sewickley, PA 15143
Phone: 412-699-3850
glenosborneborough.org

Electrical Permit Application

Date: _____

Location of Property: _____

Municipality: Glen Osborne Borough County: Allegheny

Contractor same as builder? ☐ Yes ☐ No (If no, please complete Contractor details below.)

Contractor Name: _____ Reg. #: _____

Address: _____

Phone: _____ Fax: _____

Type of Electrical Work: ☐ New ☐ Additional ☐ Repair/Alteration

Utility Company: _____ Work Order Number: _____

Description of Work: _____

Estimated Cost of Electrical Work: _____

No.	Equipment	No.	Size	Equipment
_____	Luminaries	_____	_____ Amp	Service Panel
_____	Receptacles	_____	_____ AMP	Sub-Panels
_____	Switches	_____	_____ AMP	Sub-Panels
_____	Detectors	_____	_____ KW	Dishwasher
_____	Pole Luminaries	_____	_____ HP	Garbage Disposal
_____	Spa/Hot Tub	_____	_____ KW	Central A/C Unit
_____	Swimming Pool	_____	_____KW	Electric Range Receptacle
	☐ Above Ground ☐ In Ground	_____	_____KW	Oven/Surface Unit
_____	Other _____	_____	_____KW	Electric Water Heater
_____	Other _____	_____	_____HP/KW	Space Heater
_____	Other _____	_____	_____KW	Electric Dryer Receptacle
		_____	_____KW	Baseboard Heat

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT AND ACKNOWLEDGE THE SMOKE DETECTOR REQUIREMENTS INVOLVED WITH ALTERATION, REPAIR AND ADDITION PERMITS.

_____ _____ _____

Applicant/Agent Signature Print Name Date

FOR OFFICIAL USE ONLY

ELECTRICAL PERMIT APPLICATION: ☐ Approved ☐ Denied

By: _____ Date: _____

Permit No.: _____

Reason for denial (if applicable):

_____

Electrical Permit Fee:	$_____
Municipal Fee:	$_____
Training Fee:	$_____
TOTAL PERMIT FEE:	**$_____**