



Village of Newburgh Heights Housing and Building Department

3801 Harvard Ave., Newburgh Heights OH 44105 Phone: 216-641-4654

Application for Electrical Permit

Permit No. _____

Date Received _____

Section 1 – General Information

Date _____

PLEASE PRINT OR TYPE

Estimated cost of Project \$ _____

Address of construction _____

Owner's name _____ Phone _____

Owner's address _____

Contractor _____ Business phone _____

E-mail address _____

Contractor's address _____
Street City State Zip

Section 2 – Description of Property and Project

Type of Structure	Type of installation	# of units	Type of installation	# of units
Single family	Light fixture	_____	Emergency light	_____
Two family	Receptacle outlet	_____	Motors	_____
Three family	High intensity lights	_____	Generator	_____
Apartment	Panel - MAIN	_____	Signs	_____
Commercial	Panel - SUB	_____	Electric furnace	_____
Other (describe)	Service upgrade	_____	Temporary lighting	_____
	Service replacement	_____	Hot-tub/Spa	_____
Type of Work	Meter base	_____	Water heater	_____
New structure	Exhaust fan	_____	Smoke detectors	_____
Addition	Baseboard heater	_____	Other	_____
Alteration	Range	_____		
Repair	Air conditioner	_____		
Replacement				
Other (describe)				

Contractor is required to schedule a rough-in inspection before any concealment.

By signing the application, the applicant certifies that the installation will comply with the regulations of the Newburgh Heights Building Code and State Codes.

TO THE BUILDING COMMISSIONER: This application is submitted for a permit to erect, add to, alter or repair a structure as described in this application and any drawings which accompany it. The acceptance of the permit shall be considered an agreement on the part of the applicant or his agents to comply with the Building and Zoning codes of the City of Newburgh Heights, or other orders, requirements or specifications slated in the permit.

In signing this application, the contractor or owner's agent certifies that the work is authorized by the owner or record.

Applicant's signature _____ Print name _____ Date _____

Applicant is Owner Contractor Owner's agent

DO NOT WRITE BELOW THIS LINE (OFFICE USE ONLY)

Section 3 – Additional Requirements (to be filled out by staff)

Reference building permit number _____

Section 4 – Approval and Fees

Building Official _____ Date of Approval _____

Section 5 – Payment

Permit Fee

State Fee

Surcharge Amount _____

Total Amount

Cash

Check # _____

Credit Card

Card # _____

Name on card _____

Exp. date _____ CVS _____