

Village of Whitefish Bay  
 5300 N Marlborough Dr.  
 Whitefish Bay, WI 53217  
 Phone 414-962-6690  
 Fax 414-962-5651

# Electrical Permit

Permit # \_\_\_\_\_  
 Tax Key # \_\_\_\_\_

**Project Address** \_\_\_\_\_

Project Owner Name \_\_\_\_\_ Phone \_\_\_\_\_

Project Description \_\_\_\_\_

Master # \_\_\_\_\_

Contractor Name \_\_\_\_\_

Elect Cont # \_\_\_\_\_

Contractor Phone # \_\_\_\_\_ Email \_\_\_\_\_

Contractor Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

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, or Inspector; and certifies that the above information is accurate. Please have permit number and address available when requesting inspections. Call 414-962-6690. Give at least 24 hours notice on all inspections. Permit expires per Chapter 11-1 I.

### Schedule of Inspection Fees

Installation of Wiring and Equipment As Follows	Number	Fee	Total (Number x Fee)
1. Switches and Outlets		1.00	
2. Light Fixtures		1.00	
3. Floodlight, Light poles		5.00	
4. Temporary Service and Wiring		40.00	
5. Service (please indicate size _____ amp)		40.00	
6. Sub Panel		25.00	
7. Range, Oven, Dishwasher, disposal, Microwave, Refrigerator		7.00	
8. Outlets over 120 volts		7.00	
9. Water Heater		10.00	
10. Clothes Dryer		10.00	
11. Furnace, Air Conditioner, Boiler, Electric Furnace		10.00	
12. Feeder, Sub Feeder No. 8 or Larger		25.00	
13. Each Motor per HP or Fraction thereof		1.00/HP	
14. Swimming pool and associated wiring		80.00	
15. Hydro Massage, Hot Tub		40.00	
16. Signs		50.00	
17. Smoke Detectors, Photo Cells (per detector)		5.00	
18. Fire Alarm Systems		80.00	
19. Exit Lighting Systems (90 Min Test Required)		150.00	
20. Fans (bath/paddle/misc)		5.00	
21. Generator (site plan required)		50.00	
22. Solar Photovoltaic System		100.00	
23. Other (please specify)		40.00	
24. Addition/Accessory Building <300 sq. ft.		50.00	
25. Addition/Accessory Building >300 sq. ft.		75.00	
26. New Building		125.00	

Minimum Permit Fee..... \$65.00  
 Re-inspection Fee..... Fee Sch.  
 Failure to call for inspection..... \$50.00  
 Missed Appointment Fee..... \$50.00

**Total**  \$  
**\*\*\*\*All Fees Non-Refundable\*\*\*\***  
**4x/6x FEE FOR WORK STARTED PRIOR TO PERMIT ISSUANCE**

Conditions: \_\_\_\_\_

Permit Fee	Permit Issued By Municipal Agent	Permit Expires in
	Name _____	6 Months <input type="radio"/>
	Date _____	18 Months <input type="radio"/>
	Certification # _____	24 Months <input type="radio"/>