## NEWLIN TOWNSHIP CHESTER COUNTY, PENNSYLVANIA

1751 Embreeville Road Coatesville, Pa 19320

Phone: (610) 486 - 1141 Fax: (888) 659 - 8823

Email: info@newlintownship.org Copy to: <u>cakologie@casval.com</u>

## **ELECTRICAL PERMIT APPLICATION**

In connection with erection of new buildings, additions, alterations, repairs, raising, moving, removing or tearing down any building or part of same.

This permit is for any work not exempted under the parameters of PA. ACT 45, SECTION 403.62

Instructions for completing Application:

- 1. This application and any accompanying plans must be mailed to: CASTLE VALLEY CONSULTANTS, INC., 1011 Daisy Point Road, Pottstown, PA 19465. For faster service, you can email the application and plans to <a href="mailto:cakologie@casval.com">cakologie@casval.com</a>. The zoning officer will send you a permit fee worksheet with the required fees to be submitted. Please copy the Township on all correspondence. <a href="mailto:info@newlintownship.org">info@newlintownship.org</a>.
  - NOTE: Three (3) sets of plans and specifications shall accompany the application as well as three (3) plot plans showing the size of the lot and the location of improvements thereon, giving side, rear and front yard requirements.
- 2. The application fee and a copy of the application form must be sent to Newlin Township at the address above. For faster service, you can email to <a href="mailto:info@newlintownship.org">info@newlintownship.org</a>.

  NO APPLICATION WILL BE ACCEPTED WHICH IS INCOMPLETE AND/OR WHICH IS SUBMITTED WITHOUT THE REQUIRED FEE. FEES MUST BE RECEIVED BY THE TOWNSHIP SECRETARY PRIOR TO ACCEPTANCE OF THE APPLICATION.

NOTE: Three (3) sets of plans and specifications shall accompany the application as well as three (3) copies of the unit specifications from the manufacturer and three (3) copies of the sizing calculations or equivalent. Applicants must complete the attached insurance form pursuant to the Workers Compensation Reform Act P.A. 44.

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Please submit the <u>completed</u> application via email to: <u>info@newlintownship.org</u> For any and all questions, please use the Township as first point of reference.

PERMIT NO		DATE ISSUED:
Location of Work:		
TAX PARCEL NUMB	ER:	USE:
TO: The Building/Zoni	ng Officer, Township of	Newlin, Chester County, PA
APPLICANT		
Name of Owner	Address	
Phone Number		

## INSTALLER

Name of Installer	Address	
Phone Number	Email	
INSPECTING AGENCY	7	
Name of Inspecting Age	ncy Address	
Phone Number	Email	
Type of Building (Check	all that apply):	
☐ House ☐ Apar If House, how ma	<del></del>	lding Commercial Building c.):
Type of Work:		
☐Alteration ☐Re	epair Replacement	New Construction
Special Conditions:		
☐ Air Conditioning ☐ Electric Heat	_	oment Gas Burning Equipment
Description of Electrical	Work & Size of Servic	e:
Note: ALL FLECTRI	CAL WORK SHAI	L CONFORM WITH ALL APPLICABLE
		ECTION CERTIFICATE REQUIRED
Fee: \$		Estimated Cost: \$
I HEREBY CERTIFY THE BEST OF MY KNO		ENTS CONTAINED HEREIN ARE TRUE TO IEF.
Owner's Signature		Applicant's Signature
Approved By		Date