

VILLAGE OF MERTON
ELECTRICAL PERMIT APPLICATION
P.O. Box 13, N67 W28343 Sussex Rd, Merton, WI 53056-0013

A copy of this form will be sent to you with your PERMIT #

JOB ADDRESS _____

ELECTRICIAN _____ HOME OWNER _____

ADDRESS _____ ADDRESS _____

PHONE _____ PHONE _____

WORK PERFORMED	NO.	FEE	AMOUNT
1 Wiring for lights, switch or outlets	_____	0.50	ea. _____
2 Installing light	_____	0.50	ea. _____
3 Fluorescent light fixture per tube	_____	0.50	ea. _____
4 Wiring for range outlet	_____	6.00	ea. _____
5 Wiring for hot water heater	_____	6.00	ea. _____
6 Wiring for furnace	_____	6.00	ea. _____
7 Wiring for motors .50 per hp	_____	0.70	hp. _____
8 Wiring for A/C system	_____	10.00	ea. _____
9 Wiring for dryer	_____	6.00	ea. _____
10 Wiring for dishwasher	_____	6.00	ea. _____
11 Wiring for garbage disposal	_____	6.00	ea. _____
12 Wiring for heating per KW	_____	0.70	KW _____
13 Wiring for post lamp	_____	6.00	ea. _____
14 Wiring for exhaust and paddlefans	_____	2.00	ea. _____
15 Wiring for water well system	_____	10.00	ea. _____
16 Wiring mercury & high pressure sodium fixture	_____	4.00	ea. _____
17 Wiring for timmers & dimmer	_____	4.00	ea. _____
18 Wiring for temporary service	_____	20.00	_____
19 Wiring for service entrance	_____	_____	_____
20 0-200 amp	_____	30.00	_____
201-600 amp	_____	50.00	_____
Additional meters	_____	20.00	ea. _____
21 Wiring for signs	_____	30.00	ea. _____
22 Wiring for generators	_____	_____	_____
23 Up to 10 KW	_____	10.00	_____
Over 10 KW	_____	20.00	_____
Swimming pools inground	_____	50.00	ea. _____
24 Above ground pools, spas & jaccuzis	_____	50.00	ea. _____
25 Hydromassage tub (whirlpool)	_____	25.00	ea. _____
26 Additional inspection where required	_____	50.00	_____
27 Reinspections	_____	50.00	_____
28 Minimum permit fee or line item total whichever is greater	_____	50.00	_____

Failure to obtain permit prior to the commencement of work results in DOUBLE FEES

Greater of Line Item Total Or Minimum Fee TOTAL \$ _____

Make checks payable to: The Village of Merton

SIGNATURE _____ DATE _____

ADDRESS _____

PHONE _____ LIC/CERT # _____

FOR INSPECTION CONTACT DAVE ARNOLD 567-9311

