



Parcel No. _____

Permit No. _____

VILLAGE OF WINNECONNE, WI

Contact James Fluette 920-582-4381 x1003 for questions.

CSR@winneconnewi.gov for submittals & Payments sent to Village of Winneconne, P.O. Box 488, Winneconne, WI 54986

Electrical Permit Application

Property Owner: _____ Phone: _____

Property Address: _____

Contractor's name: _____ License #: _____

Contractor's address: _____

Contractors E-mail: _____

Type of occupancy: _____

Job description: _____

New construction _____ Main panel _____ Single phase _____

Additional areas _____ No. of Circuits _____ Three phase _____

Service change _____ No. of outlets _____ Three wire _____

Rewire existing _____ No. of Sub-Panels _____ Four wire _____

Overhead _____ No. of Service Panels _____ Amperage _____

Underground _____ No. of meters _____ Voltage _____

Project total cost \$ _____

Base Fee \$ 125.00

Owner/Contractor: _____ Date: _____

Inspector: _____ Date: _____

Payable to: Village of Winneconne

Mail to: Village of Winneconne, PO BOX 488 Winneconne, WI 54986 • PH 920-582-4381 • FAX 920-582-0660

All work to meet the State Codes or reinspection fees will be charged for improper installation.

The owner/contractor is responsible for making arrangements for the final inspection.