

# ELECTRICAL PERMIT APPLICATION



Waterloo Building Department  
 715 Mulberry Street – Waterloo IA 50703  
 Ph 319-291-4319 Fx 319-291-4262  
 www.cityofwaterlooia.com

OFFICE USE ONLY	
PERMIT #	_____
PERMIT FEE \$	_____
DATE	_____

Site Address \_\_\_\_\_ Date \_\_\_\_\_

Owner/Occupant \_\_\_\_\_ Phone \_\_\_\_\_

**COMMERCIAL**      OR       **RESIDENTIAL**  
 **New Construction**     **Remodel**     **Addition**     **Garage**

**\$10.00 BASE FEE / PERMIT**

<input type="checkbox"/> <b>NEW ELECTRICAL SERVICE</b> <input type="checkbox"/> <b>REPLACEMENT</b> <input type="checkbox"/> <b>UPGRADE</b> <input type="checkbox"/> <b>UTILITY TURN ON FOR EXISTING SERVICE</b>	<u>Quantity</u> _____ <b>Air Conditioner</b> _____ <b>Electric Furnace</b> _____ <b>Gas Furnace</b> _____ <b>Elect. Water Heater</b> _____ <b>Baseboard Heat</b>						
<table border="0"> <tr> <td style="text-align: center;"><u>CAPACITY</u></td> <td style="text-align: center;"><u>CAPACITY</u></td> </tr> <tr> <td>100 amp _____</td> <td>400 amp _____</td> </tr> <tr> <td>200 amp _____</td> <td>OTHER amp _____</td> </tr> </table>	<u>CAPACITY</u>	<u>CAPACITY</u>	100 amp _____	400 amp _____	200 amp _____	OTHER amp _____	
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100 amp _____	400 amp _____						
200 amp _____	OTHER amp _____						

	<u>Quantity</u>	<u>Size</u>	<u>Quantity</u>	<u>Size</u>	<u>Quantity</u>	<u>Size</u>
<b>SUBPANELS</b>	_____	_____	_____	_____	_____	_____

<u>Description</u>	<u>Quantity</u>	<u>FEE</u>	<u>Description</u>	<u>Quantity</u>	<u>FEE</u>
<b>FIXTURES</b>		\$ _____	Dishwasher	_____	\$ _____
<b>ROUGH WIRE</b>			Disposal	_____	\$ _____
Light Outlets	_____		Electric Dryer	_____	\$ _____
Receptacle Outlets	_____		Range	_____	\$ _____
Switch Outlets	_____		Sump Pump	_____	\$ _____
Smoke Detectors	_____		Residential Vent Fan	_____	\$ _____
<b>Total Rough Wire</b>	_____	\$ _____	Light Standard	_____	\$ _____
<b>Motors</b> - 0 - 10 HP	_____	\$ _____	Signs using	_____	\$ _____
- 10 - 25 HP	_____	\$ _____	Temporary Pole	_____	\$ _____
- Over 25 HP	_____	\$ _____	Generator	_____	\$ _____

**Specialized Equipment:** (i.e. X-Ray Equipment, Transformers, Welders, Walk-in Cooler/Freezer, Fryers, etc.)  
 \_\_\_\_\_  
 \_\_\_\_\_

**Solar Install:** \_\_\_\_ ground mount    \_\_\_\_ roof mount    # \_\_\_\_ panels    \_\_\_\_ kWh    \_\_\_\_ ESS

**REINSPECTION FEE** (incorrect address, no address posted, incomplete work, unable to enter site or corrections needed ..... **\$50 EACH TRIP**)

**WORKING WITHOUT A PERMIT = double the permit fee** or an additional **\$50** added to the permit – whichever is greater.

**COMPANY Name** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

PLEASE PRINT

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

SIGNATURE OF APPLICANT

PLEASE PRINT