



Town of Munster

ELECTRICAL PERMIT APPLICATION

Community Development ~ Building & Code Enforcement Division ~ 1005 Ridge Rd. ~ Munster, IN 46321
Phone 219-836-6990 ~ Fax 836-6542

TYPE OR PRINT IN INK

PERMIT #: _____

Project Address: _____ Zoning District: _____

Owner/Tenant: _____ Email: _____

Address: _____ Cell #: _____

Electrical Contractor: _____ Email: _____

Address: _____ Cell #: _____

REGISTRATION #: _____

SCOPE OF WORK

___ Commercial ___ Industrial ___ Institutional ___ Multi-Family Residential ___ One- & Two-Family

___ New Service; _____ Amps ___ Upgrade; _____ Amps to _____ Amps ___ Temp. Service; _____ Amps

___ Remote Panel; _____ Amps ___ Service Reconnect: _____ Amps ___ Single Phase ___ Three Phase

___ Power Distribution System; # of Services: _____ / # of Amps: _____ / Phase: _____ / # of Circuits: _____

___ Other/Description: _____

Is this a Rental Dwelling? ___ Yes ___ No

PROJECT COST: \$ _____

The undersigned certifies that the owner of record authorizes the proposed project and that the undersigned has been authorized by the owner to make this application as the authorized agent and agrees to conform to all applicable laws of this jurisdiction.

Applicant's Signature: X _____ Date: _____

Applicant's Printed Name: _____ Cell #: _____

BUILDING & CODE ENFORCEMENT DIVISION

PERMIT RELEASED

PERMIT DECLINED

Reviewer: _____ Title: _____ Date: _____ Permit Fee: \$ _____

Notes: