

TOWN OF OSSINING BUILDING & PLANNING DEPARTMENT 101 Route 9A, P.O. Box 1166 Ossining, New York 10562 Phone (914) 762-8419 Fax (914) 290-4656

website www.townofossining.com email bldgdept@townofossining.com

APPLICATION FOR ELECTRICAL PERMIT

Date

Fee Paid:

Application is hereby made for a permit to perform the work herein specified. It is desired to construct/alter the electrical system in the new/existing building located at

(Owner Name & Address)

Section_____ Block____ Lot____

The proposed work outlined in this application conforms to all provisions of the ordinances of the Town of Ossining and the laws of Westchester County and the State of New York. It is agreed that the work will be prosecuted in accordance with the provisions of such ordinances and laws.

LOCATION OF WORK _____

DESCRIPTION OF WORK_____

Outlets	SwitchF	Receptacle	_ Pendants	Fixtures	_ Br. Circuits
No. Motors_	Total H.P.	Service Di	sconnect No	_ Amp	
Fees:	Per Dwelling		\$ 115.00		
	Alteration to Commercial Building		lding \$ 200.00		
	New Commercial Construction		on \$ 300.00		

NOTE: Legalization & After-the-fact Electrical Work is 3 x fee shown above _____

It is hereby agreed that all work shall be done in compliance with the requirements of the National Electrical Code governing such installations.

Name Printed	Signed	
Address	Email	
Telephone#	Westchester County License#	

Date:		
	Building Inspector's Approval	
Electrical Permit No		
Building Permit No		