



# Electrical Permit Application

Rev 01/20

Building Inspection Department

Office Location: W282 N6996 Main St.

PO Box 13, Merton, Wisconsin 53056

Office Hours: Mon-Thursday 3:00-6:00 pm

Phone: 262-538-0820 Fax: 262-538-4981 [www.villageofmerton.com](http://www.villageofmerton.com)

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

JOB ADDRESS \_\_\_\_\_

ELECTRICIAN \_\_\_\_\_ HOME OWNER \_\_\_\_\_

ADDRESS \_\_\_\_\_ Email \_\_\_\_\_

PHONE \_\_\_\_\_ PHONE \_\_\_\_\_

WORK PERFORMED	NO.	FEE	AMOUNT
1 Light switch and convenience outlets	_____	1.00	ea. _____
2 Light Fixtures	_____	1.25	ea. _____
3 Fluorescent I fixtures	_____	3.00	ea. _____
4 HID, Mercury, Sodium, Metal Halite	_____	4.00	ea. _____
5 Range Outlet, 220 volt	_____	10.00	ea. _____
6 Water Heater, Electric	_____	10.00	ea. _____
7 Furnace & Heating Device's	_____	10.00	hp. _____
8 A/C System or Refrigeration Unit	_____	10.00	ea. _____
9 Clothes Dryer, Electric	_____	10.00	ea. _____
10 Dishwasher	_____	10.00	ea. _____
11 Garbage Disposal	_____	10.00	ea. _____
12 Electric Heat per KW	_____	1.00	per kw _____
13 Post light, or Light Pole	_____	10.00	ea. _____
14 Exhaust Fan and Paddle Fans	_____	4.00	ea. _____
15 Water Well System, Mound System	_____	15.00	ea. _____
16 Dimmer, Timers, Occ.Sensors etc.	_____	2.00	ea. _____
17 Signs	_____	30.00	ea. _____
18 Swimming pools inground	_____	100.00	_____
19 Above ground pools, spas	_____	75.00	_____
20 Hydro Massage Tub (whirlpool)	_____	35.00	_____
21 Temporary Service, Const. Fire Damage Etc.	_____	85.00	_____
22 Service 0-200 Amp	_____	75.00	_____
23 Service 201-600 AMP	_____	125.00	_____
24 Generators	_____	75.00	_____
25 Fire, Carbon Monoxide, Smoke Alarm's	_____	3.00	_____
26 Reinspection Fee	_____	75.00	_____
27 <b>Min. permit fee or line item total whichever is greater</b>	_____	55.00	_____

**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: Village of Merton

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

EMAIL \_\_\_\_\_

PHONE \_\_\_\_\_ LIC/CERT # \_\_\_\_\_

FOR INSPECTIONS CONTACT DAVE ARNOLD 262-567-9311