



ELECTRICAL APPLICATION

1014 110th Ave. Amery WI 54001
715 497 3458
office@reminspecting.com

| OFFICE USE ONLY | |
|-----------------|--|
| REMI # | |
| Fee Total | |
| Payment type | |
| Payment Date | |

MUNICIPALITY JURISDICTION VERIFICATION

Provide the name of the TOWNSHIP or VILLAGE or CITY this project is located in

PROJECT PROPERTY ADDRESS / OWNER INFORMATION

| | | | | |
|--|---------|--------------|--------------------------------|--|
| Project ADDRESS (Street No. and Name and city) | | | County | |
| Estimated electrical project valuation cost: | ZIPCODE | Owner email: | | |
| NAME OF OWNER | | | OWNER PHONE/CELL # (AREA CODE) | |

APPLICANT INFORMATION

| | | | | | |
|--|--|-----------------|----------------------|-------|-------------|
| WHO IS APPLYING? Owner Agent | | APPLICANT NAME: | | | |
| APPLICANT PHONE / CELL # (AREA CODE) | | APPLICANT EMAIL | | | |
| BILLING ADDRESS | | | CITY | STATE | ZIPCODE |
| MASTER ELECTRICIAN LICENSE # | | EXPIRY DATE | CONTRACTOR LICENSE # | | EXPIRY DATE |
| NAME, EMAIL, PHONE OF MASTER ELECTRICIAN | | | | | |
| NAME, EMAIL, PHONE OF ELECTRICAL CONTRACTOR | | | | | |

LOCATION OF JOB / PROJECT

| | | | | | |
|--|---|--|---|--|--|
| Is there a Building Permit for this project? | | <input type="checkbox"/> No <input type="checkbox"/> Yes, Permit #: _____ | | | |
| Select the location of the work <input type="checkbox"/> Farm <input type="checkbox"/> OTHER <input type="checkbox"/> Public Building; Structure; Premises <input type="checkbox"/> Place of Employment | <input type="checkbox"/> Manufactured home community <input type="checkbox"/> Public Marina, Pier, Dock or Wharf | | <input type="checkbox"/> Campground <input type="checkbox"/> RV Park | | |

PLAN REVIEW EMAIL THE ONE LINE DRAWINGS OR ELECTRICAL PLANS OF THE WORK TO BE PERFORMED, IF AVAILABLE

HAVE ELECTRICAL PLANS BEEN SUBMITTED VIA EMAIL: YES NO NO PLANS/DRAWINGS AVAILABLE FOR THE PROJECT

If plans have been submitted prior to this permit, on what date where they submitted:

PROVIDE a DETAIL DESCRITION OF THE WORK:

OFFICE USE ONLY: Fees

| | | | | |
|--------------------|----------------|-----------------|-------------|------------|
| Administration Fee | Inspection Fee | Plan Review Fee | Mileage Fee | Other fees |
|--------------------|----------------|-----------------|-------------|------------|

APPLICANT SIGNATURE

Wisconsin State Law, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform electrical work. Violators are subjected to fines and legal prosecution. I agree this application is only for the work described, and does not grant permission for additional or related work which requires a separate application. I hereby certify that the proposed work is authorized by the owner, and that I am authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of the State of Wisconsin and the local jurisdictions. All information on this permit application is accurate to the best of my knowledge.

| | | |
|---|---|--|
| <div style="background-color: red; color: white; padding: 5px; display: inline-block;">SIGN</div> X | <div style="background-color: orange; color: white; padding: 5px; display: inline-block;">PRINT</div> X | <div style="background-color: blue; color: white; padding: 5px; display: inline-block;">DATE</div> |
|---|---|--|