

TOWN OF MORRISTOWN ELECTRICAL PERMIT APPLICATION

Date Submitted: _____

Tax Map #: _____

Permit number: _____

Date Approved: _____

Zoning District: _____

Date Permit Paid: _____

ZBA or PB Approval: _____

Valuation : \$ _____

Bldg Permit Fee: _____

Commercial

Single – Family

Duplex

Multi – Family

JOB ADDRESS _____ ZIP _____

OWNER _____ PHONE _____

ADDRESS _____

CONTRACTOR _____

CONTRACTOR ADDRESS _____ PHONE _____

Please select the type of work that will be completed and include amperage and model of appliance if applicable

NEW SERVICE		FIRE ALARM	
SERVICE AMPERE RATING		SERVICE CHANGE	
ELECTRICAL WALL HEATER KW		ELECTRICAL FURNACE KW	
CONSTRUCTION METER		OTHER	

PLEASE DESCRIBE THE PROJECT (REQUIRED) :

THE ISSUANCE OF A PERMIT, ANY INSPECTION MADE OR CERTIFICATE OF OCCUPANCY ISSUED SHALL NOT BE CONTRUED TO BE A PERMIT FOR, NOR AN APPROVAL OF, ANY VIOLATION OF THE NY STATE BUILDING CODES OR ANY OTHER CODE OR ORDINANCE ADOPTED BY THE VILLAGE OR TOWN OF MORRISTOWN.

BY SIGNING BELOW I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT ALL INFORMATION IS CORRECT AND AGREE NOT TO START THIS PROJECT UNTIL THIS APPLICATION IS APPROVED AND THE BUILDING PERMIT IS ISSUED. I ALSO AGREE TO COMPLY WITH THE LAWS OF THE STATE OF NEW YORK AND TO THE ZONING REGULATIONS AND NY STATE BUILDING CODES AS ADOPTED BY THE VILLAGE & TOWN OF MORRISTOWN AND AS APPLICABLE. ANY VIOLATION OF THESE TERMS WILL BE CAUSE FOR IMMEDIATE REVOCATION OF THIS PERMIT.

Signature of Applicant

Print Name

FOR USE BY CODE ENFORCEMENT OFFICER ONLY.

Permit for use

Approved

Denied – Not in conformance with the following provision(s) of the Town of Morristown Zoning

Ordinance: _____

Denied – Does not meet New York State Fire Prevention and Building Codes.

Comments: _____

Date: _____ By: _____

