



# ELECTRICAL PERMIT APPLICATION

CITY OF ANTIGO BUILDING INSPECTOR AND ZONING ADMINISTRATOR  
700 EDISON STREET, ANTIGO, WISCONSIN 54409  
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ALL INFORMATION MUST BE PRINTED AND LEGIBLE

PERMIT EXPIRES \_\_\_\_\_ PERMIT NUMBER \_\_\_\_\_

PROJECT LOCATION \_\_\_\_\_

OWNER(S): \_\_\_\_\_ ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

ELECTRICAL CONTRACTOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

CREDENTIAL NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**RESIDENTIAL PERMIT FEES FOR NEW CONSTRUCTION** (electrical services not included) :

Square footage of completed space (including garage) \_\_\_\_\_ @ .07 per square foot \$ \_\_\_\_\_

**COMMERCIAL PERMIT FEES FOR NEW CONSTRUCTION** (electrical services not included):

|   |  |          |
|---|--|----------|
| Building Square Footage _____             |  |          |
| Under 10,000 @ .08 per square foot        |  | \$ _____ |
| 10,000 up to 50,000 @ .05 per square foot |  | \$ _____ |
| 50,000 and over @ .03 per square foot     |  | \$ _____ |

**ELECTRICAL SERVICE INSTALL PERMIT FEE** (in addition to above base fee)

|                    |                      |          |
|--------------------|----------------------|----------|
| Residential        | \$15.00 per 100 amps | \$ _____ |
| Commercial         | \$10.00 per 100 amps | \$ _____ |
| Temporary Services | \$30 per service     | \$ _____ |

**CHANGES AND ADDITIONS TO EXISTING WIRING** (includes repairs of existing wiring and new remodeling work)

\$25 per every \$1000 of work with minimum of \$30 fee \$ \_\_\_\_\_

**ELECTRICAL SERVICE REPAIR OR MODIFICATION** (disconnect & reconnect) \$30 \$ \_\_\_\_\_

**MINIMUM PERMIT FEE** \$30 \$ \_\_\_\_\_

**PENALTY IS DOUBLE THE FEE FOR WORK STARTED BEFORE OBTAINING PERMIT** \$ \_\_\_\_\_

**TOTAL PERMIT FEES:** \$ \_\_\_\_\_

|                              |                              |
|------------------------------|------------------------------|
| _____<br>APPLICANT SIGNATURE | _____<br>INSPECTOR SIGNATURE |
|------------------------------|------------------------------|