

Permit # _____

Electrical Permit-Town of Neenah

Owners name _____ Phone _____

Project address _____

Contractors name _____ Phone _____

Contractors address _____ Fax #: _____

Type of occupancy _____

Job description _____

New construction _____ Main panel _____ Single phase _____

Additional areas _____ No. of Circuits _____ Three phase _____

Service change _____ No. of outlets _____ Three wire _____

Rewire existing _____ No. of sub-panels _____ Four wire _____

Overhead _____ No. of service panels _____ Amperage _____

Underground _____ No. of meters _____ Voltage _____

Base fee includes one panel or Temporary Service \$45.00

Per Circuit charge count _____ (Times) \$2.50 each = _____

Alteration to existing openings count _____ (Times) \$.50 each = _____

Additional panels count _____ (Times) \$20.00 each = _____

Project total cost\$ _____ Total Fees \$ _____

Owner/Contractor _____ Date _____

Inspector _____ Date _____

Payable to: Town of Neenah,

Mail to: Gary Klinka, 228 Mandella CT Neenah, WI 54956. Phone:920-727-9200 Fax: 888-727-9200

- All work to meet the State Codes or reinspection fees will be charged for improper installations.
- The owner/contractor is responsible for making arrangements for the final inspection.
- Permit required-New Single Family Homes, service changes, remodeling, and additions.

Electrical Inspection

Only use this form for new construction or meter changes



Return instructions

Mail: We Energies
Central Group
W240 N2989 Hwy. 164
Pewaukee, WI 53072
Phone: 262-574-6400 or 866-423-0364, ext. 6453
Fax: 262-574-6401 or 800-632-1460
Email: co-non-design-central@we-energies.com

Electrical Contractor is responsible for filling out the remainder of this form and include with the permit

City / Town / Village (enter taxing municipality): Town of Neenah

Site address: _____

City: Town of Neenah State: WI ZIP: 54956

Inspector name: Gary Klinka Permit number: _____

Inspector phone number: (920) 727-9200 Other phone: (920) 740-6723

Inspector email: gklinka@hotmail.com

Customer name: _____

Customer phone: (920) _____

Electrical contractor: _____

Electrical contractor phone: (920) _____

Inspection date: _____ Inspector certification#: _____

New service

- Service type: Residential Commercial
Duration: Permanent Temporary
Subdivision: Yes No
 Overhead Underground

Size: _____ amps _____ volts Phase: One Three Number of meters: _____

Rewire service

- Service type: Residential Commercial
Duration: Permanent Temporary

Customer power: On Off Reconnect at: Pole House
 Overhead to underground Overhead to overhead Underground to underground
Size: _____ amps _____ volts Phase: One Three Number of meters: _____

- Details (check all that apply): Permanent connections made
 Permanent connections required
 Service drop relocations / replacement required
 Additional / new meter install required

Cogeneration: Solar Geothermal Wind

Notes: _____