



Borough of Quakertown
 Community Development Office
 35 N. Third Street
 Quakertown, PA 18951
 Tel.: 215-536-5001



ELECTRIC CONNECTION PERMIT

For office use only

Permit No. _____

Zone _____

Date _____

Tax Parcel _____

\$1000.00 Deposit _____

Contractors Name and Address: _____

Contractors Phone#: _____ Email: _____

Job Location: _____

Property Owners Name and Address: _____

Property Owners Phone #: _____

Existing Service _____ Amps _____/_____ Volts Overhead _____ Underground _____

New Service _____ Amps _____/_____ Volts Overhead _____ Underground _____

Please provide the scope of work to be performed including specifics on transformer and feeder size requirements. An estimate for the work to be done will be prepared based off of the information given.

Applicant: Print Name: _____ Signature: _____

For office use only

Permit Approved _____

Denied _____

Date _____

 Douglas C. Wilhelm, Code Enforcement Officer / BCO, CFEI