

Town of Orchard Park

Date: _____

BUILDING INSPECTOR'S OFFICE
S 4295 South Buffalo Street
Orchard Park, New York 14127-2609



Phone: 716-662-6430
Fax: 716-662-6419
www.orchardparkny.org

Electrical Permit Application

Applications must be submitted and paid for before inspection
Electrical inspector: Rayne Degre (716)662-6430 ext. 1406

Address: _____ Zone: _____

Value of Project: _____ S.B.L # _____ Lot No _____

Licensed Electrician: _____ License Number: _____

Electrician's Signature: _____

Address: _____

Phone: _____ Email: _____

Contractor: (If different from Electrician) _____

Address: _____

Phone: _____ Email: _____

Description of Work to be completed Appropriate information must be provided for remodeling or interior alterations. For exterior installations such as AC units or generators a site plan or copy of the property survey with the location of the equipment indicated is required. AC units or generators submit documentation of: manufacture, model#, unit specs, and appliance tested in accordance with (ANSI / UL) per IBC and IRC.

ESO # (From NYSEG) _____

Building Type: Residential _____ Commercial _____

New Build _____ Remodel _____ Service Size _____ Service Lateral _____

Service Drop _____ Number of Meters _____

Town Clerk Stamp

To the best of my knowledge, the foregoing petition and plans conform to the ordinances of the Town of Orchard Park. The Building Inspector(s) are permitted to enter the premises listed herein in any reasonable time to perform all required inspections of the permitted work.

Property Owner: _____ Letter of Authorization Submitted
Print and Sign

Address: _____ Phone: _____

City State Zip

Official Use Only:

Items supplied: Disability _____ Workers Compensation _____ Insurance Waiver _____

Electrical Inspector: _____ Issued: _____

Permit Fee _____ Completed as per Electrical Inspector _____

Permit #: _____

Electrical