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ELECTRICAL ONLY APPLICATION

Date: _____

Check one: Residential () Commercial ()

Municipality: _____ PERMIT# _____

Project Address: _____ KEYCODESA# _____

Applicant: _____ Email: _____ Phone: _____

Owner: _____ Email: _____ Phone: _____

Contractor: _____ Email: _____ Phone: _____

Brief Description of Electrical Work: _____

Name of Power Company: PPL / Met-ed / PECO (Circle One) Other _____

Job # _____

AMP Service _____ Overhead or Underground (Circle One)

Sub Panels (# & size) _____

Complete quantity of each of the following:

Receptacles _____

Switches _____

Lights _____

Exhaust Fans _____

GFCI's _____

Paddle Fans _____

Smoke Detectors _____

Range _____

Garbage Disposal _____

Range Hood _____

Dish Washer _____

Dryer _____

Heat Pump _____

Water heater _____

Well Pump _____

AG Pool _____

Generator: NG / LP (Circle One) Size _____ KW

IG Pool _____

Spa _____

Other _____

Other _____

Totals _____