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ELECTRICAL ONLY APPLICATION

Date: _____

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 _____ | |