

TOWN OF HIGHLAND
APPLICATION FOR ELECTRIC PERMIT
PHONE 219-838-3185 FAX 219-972-5097



Date: _____

CONTRACTOR'S NAME: _____

PHONE # _____

PROPERTY OWNER: _____

PHONE # _____

PROJECT ADDRESS: _____

Describe work to be done: _____

Type of Service _____ Number of Wires _____ Amps _____

Temporary Pole _____ Early Service _____

Miscellaneous _____

If this is a remodel permit will there be more than 2 inspections? _____ If so how many? _____

Contractor's Signature: _____