



# Electrical Wiring Permit Application

(for inquiries call 1-888-659-3222)

FOR OFFICE USE ONLY		
SITE		
PERMIT	PLAN Review/Registration	Initial

Items with “\*” are REQUIRED fields. This application will not be processed if ANY of the REQUIRED fields are missing.

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Site

* PERMIT TYPE (Check ONE box only)				
<b>Permanent</b> <input type="checkbox"/> <b>New Service</b> (New Construction and/or new meter required) <input type="checkbox"/> <b>Permanent Feeder, Branch Circuit</b> (Renovations, Main Service Existing, generator panel) <input type="checkbox"/> <b>Changeover</b> (Ex. Upgrade from 100amps to 200amps – check new service box in Section 3). <input type="checkbox"/> <b>Permanent Sub-Meters</b> (Adding sub-meters)	<b>Disconnect/Reconnect</b> <input type="checkbox"/> <b>No change to main service</b> (Ex. Fuses to breakers / replace panel / meter mounted device install) <input type="checkbox"/> <b>Inside repair work when emergency repair tag was used</b> E-Tag # _____ <hr/> <b>Emergency Repair</b> <input type="checkbox"/> <b>Outside repair work</b> (Ex. Repairs to mast / meter base) E-Tag # _____	<b>Service Entrance Relocate</b> <input type="checkbox"/> (same bldg)	<b>Temporary for Construction</b> <input type="checkbox"/>	<b>Relocate Building</b> (pre-wired) <input type="checkbox"/> <hr/> <b>Sign Installation</b> <input type="checkbox"/> Quantity: ____
* <b>ELECTRICAL CONTRACTOR / or SIGN CONTRACTOR</b> (company name)		* <b>LICENCE</b>	* <b>TELEPHONE</b>	
* <b>ELECTRICIAN / or SIGN INSTALLER</b> (on-site)		* <b>LICENCE</b>	* <b>TELEPHONE</b>	
* <b>PROPERTY LOCATION</b> (address – House No./Suite/Unit, Street, Municipality)			* <b>PID</b> (from building permit)	
* <b>BUILDING USAGE</b> (ex. Day Care, duplex, etc.)	* <b>BUILDING NAME</b> (ex. Shopping Inc.)	* <b>CONSTRUCTION</b> <input type="checkbox"/> New building <input type="checkbox"/> Existing building	<b>Prefab Building Only</b> * <b>CSA # or previous wiring Permit # for New Service or Relocated Building:</b> _____	
* <b>DESCRIPTION OF WORK</b> (NEW equipment, Meter mounted device, feeders, services and branch circuits, emergency tag # – ex Heat Pump, Boiler, Furnace, Solar, wind, turbine, fuel cell)				

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Owner

* <b>PROPERTY OWNER</b> (Name & address - House No., Suite/Unit, Street, Municipality, province, postal code)		* <b>TELEPHONE</b>
BUILDING OWNER (Name & address - House No., Suite/Unit, Street, Municipality, province, postal code)		TELEPHONE
OCCUPANCY NAME (ex. Toys Inc.)	OCCUPANCY USAGE (ex. Retail store)	FLOOR/SUITE

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Service

* MAIN SERVICE INFORMATION (required information for all permit types including Sign Installation)					
<input type="checkbox"/> Overhead <input type="checkbox"/> Underground	<input type="checkbox"/> New service OR <input type="checkbox"/> Existing service	Volts	Amps	Phase	KVA
METER MOUNTED DEVICE: New <input type="checkbox"/> or Existing <input type="checkbox"/>		GENERATOR TRANSFER SWITCH INSTALLED: New <input type="checkbox"/> or Existing <input type="checkbox"/>			
COMPLETE ONLY FOR NEW SUB-METERING, BRANCH CIRCUITS WITH NO CHANGE TO MAIN SERVICE (check ONE only)					
<input type="checkbox"/> Feeder OR <input type="checkbox"/> Sub Meter qty: _____	Volts	Amps	Ph	<input type="checkbox"/> Feeder OR <input type="checkbox"/> Sub Meter qty: _____	Volts
				Amps	Ph

Submit plans stamped by an Electrical Engineer with this Wiring Permit Application when the new installation is

(a) greater than 600 amperes for a 120/240 volts single phase	(b) greater than 400 amperes for a 120/208 volts three phase
(c) greater than 400 amperes for a 347/600 volts three phase	(d) greater than 347/600 volts



## Additional information for Supply Authority



[www.nbpower.com](http://www.nbpower.com)  
[WPA@nbpower.com](mailto:WPA@nbpower.com)  
 (800) 615-0522



[www.edmundston.ca](http://www.edmundston.ca)  
[energie@edmundston.ca](mailto:energie@edmundston.ca)  
 (506) 739-2106



[www.sienenergy.com](http://www.sienenergy.com)  
[customer.service@sienenergy.com](mailto:customer.service@sienenergy.com)  
 (506) 658-5252



[www.perth-andover.com](http://www.perth-andover.com)  
[info@perth-andover.com](mailto:info@perth-andover.com)  
 (506) 273-4513

*Failure to provide the following information may result in processing delays with the Utility.*

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Utility

<b>* SUPPLY UTILITY</b>			
<input type="checkbox"/> NB Power	<input type="checkbox"/> Edmundston Energy	<input type="checkbox"/> Saint John Energy	<input type="checkbox"/> Perth-Andover Electric Light Commission
* Is Supply Authority involvement required on site?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Existing Meter Numbers
NAME AND ADDRESS FOR POWER BILL ( <i>Name &amp; address - House No., Suite/Unit, St, Municipality, province, postal</i> ):			TELEPHONE
SPECIFY WORK ORDER NUMBERS ( <i>call above utility to obtain it</i> )			
Are you installing an Electric Vehicle charging station?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Service fed from Transformer Pad?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If the owner is a municipal or government agency specify:			
CONTACT NAME	E-MAIL	TELEPHONE	

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SNB

<b>PROCESSING</b>
Applications are processed <b>in person</b> at the following Service New Brunswick locations: Bathurst, Campbellton, Edmundston, Fredericton, Miramichi, Moncton, Saint John and Woodstock <b>OR Fax application</b> to (506) 462-2013 <b>OR E-Mail to <a href="mailto:TIS@SNB.ca">TIS@SNB.ca</a></b> <b>OR Mail to</b> address below
<b>PAYMENT (PLU 784008)</b>
<b>In person at SNB:</b> All payment types accepted – Cash, Cheque, Money Order, Debit, EFT or Credit Card ( <i>Visa, MasterCard, AMEX</i> ) <b>Via cheque or money order:</b> made payable to the Minister of Finance <i>Justice &amp; Public Safety, PO Box 6000      Technical Inspection Services      Fredericton, NB      E3B 5H1</i>

\*\*\* Declaration \*\*\*

By signing this application I accept responsibility and declare that all the information contained herein is accurate to the best of my knowledge and that I or a qualified **employee** under proper supervision will be performing the work in accordance with the **Canadian Electrical Code, provincial regulations and Service Entrance Standards**; AND I understand that this application is subject to additional terms and conditions as deemed necessary at the sole discretion of the inspection department and that special inspection fees can be applied whenever wiring is commenced prior to this permit being issued; AND I further acknowledge that temporary wiring permits will expire after six month without notice, that all construction points shall be called-in for inspection and that failure to comply will result in utility services being delayed or disconnected subsequent to e-mail, mail, or verbal notification.

\_\_\_\_\_  
ELECTRICAL CONTRACTOR SIGNATURE

\_\_\_\_\_  
DATE