

Vernon Electric Cooperative Wiring Certificate

State of Wisconsin, County of: _____ Today's Date: _____

Customer's Name: _____ Map Location: _____

Owner's Name (if different): _____ Permit # (if available): _____

Service Address: _____

City/Town/Village: _____

Electrician's Name: _____

Electrician's Phone Number: _____ Cell Number: _____

Type of Service:

- | | | |
|--------------------------------------|--|--|
| <input type="checkbox"/> Residential | <input type="checkbox"/> Temporary Service | <input type="checkbox"/> Overhead Service |
| <input type="checkbox"/> Farm | <input type="checkbox"/> Permanent Service | <input type="checkbox"/> Underground Service |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Rewire/Upgrade | |

Phases: _____ Amps: _____ Volts: _____

Remarks: _____

This is to certify that the above service is compliant with the Wisconsin State Electrical Code and the installation is now ready to be energized.

For Proof of Compliance:

Electrician's Signature: _____

Electrician's License Number: _____

Or Exemption Number: _____

For UDC Inspections: (Uniform Dwelling Code (UDC) Inspection is a requirement for new construction of 1 and 2 family dwellings.)

Electrical Inspector's Name: _____

Electrical Inspector's Signature: _____

UDC Certified Inspection Nbr: _____ Date of Approval: _____

***** Before electricity may be furnished, this certificate must be completed and returned to Vernon Electric Cooperative. *****