

2025 ELECTRICAL ONLY PERMIT

MAKE CHECKS PAYABLE TO: TOWN OF AMHERST
AMHERST BUILDING DEPARTMENT / 5583 MAIN ST. / WILLIAMSVILLE, NY 14221
Phone: (716) 631-7080 Fax: (716) 631-7192 <https://www.amherst.ny.us>
PERMIT MUST BE PROCESSED PRIOR TO STARTING WORK

FILL OUT ALL APPLICABLE AREAS OF APPLICATION

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| Project Address: | |
| Licensed Electrician Name: | License # License Expiration: |
| Contractor (Business Name): | |
| Contractor Address: | |
| Contractor Phone: | Contractor Email: |
| Property Owner Name: | Owner Phone# |
| Property Owner Address: (If different than Project Address) | Owner Email: |
| Estimated Value of the Work: \$ | Installation Date: |

Description of Proposed Work: * Appropriate information must be provided for remodeling or interior alterations. For exterior installations such as AC or Generator units a copy of the property survey with the location of the equipment indicated is required. AC or Generator units submit documentation of: manufacture, model #, unit specs, and appliance tested in accordance with (ANSI / UL) per IBC and IRC.

Smoke and CO detectors must be installed in accordance with NYS Residential Building Code.

| Residential Fees | Commercial & Industrial Fees |
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| <input type="checkbox"/> Fixtures or Receptacles | <input type="checkbox"/> 1 to 10 fixtures or receptacles \$ 135.00 \$ 135.00 |
| <input type="checkbox"/> 1-10 \$ 40.00 <input type="checkbox"/> 11-20 \$ 75.00 <input type="checkbox"/> 20+ \$ 235.00 | <input type="checkbox"/> >10 fixtures or receptacles / each (min. fee \$135) \$ 2.00 |
| <input type="checkbox"/> Smoke/CO Detectors only \$ 20.00 | <input type="checkbox"/> Service 400A or less (alterations/repairs/modifications ONLY) \$ 225.00 |
| <input type="checkbox"/> Service \$ 105.00 | <input type="checkbox"/> Service > 400A (alterations/repairs/modifications ONLY) \$ 425.00 |
| <input type="checkbox"/> Generator whole house- with or without panel \$ 100.00 | <input type="checkbox"/> Car Charging Stations (Each) \$ 200.00 |
| <input type="checkbox"/> Generator Panel for portable generators \$ 40.00 | <input type="checkbox"/> PV Systems up to 25kW \$ 500.00 |
| <input type="checkbox"/> Swimming Pool – Above Ground \$ 75.00 | <input type="checkbox"/> >25kW / each KW over 25kW \$ 10.00 |
| <input type="checkbox"/> Swimming Pool – In Ground \$ 150.00 | <input type="checkbox"/> PV System Battery Back up \$ 300.00 |
| <input type="checkbox"/> PV System (Includes Fire Inspection fee) \$ 350.00 | <input type="checkbox"/> Generator \$ 225.00 |
| <input type="checkbox"/> PV System Battery Back up \$ 100.00 | <input type="checkbox"/> Signs \$ 105.00 |
| <input type="checkbox"/> Other (Call for fees) | <input type="checkbox"/> Low Voltage \$ 50.00 <input type="checkbox"/> Other (Call for fees) |

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| ELECTRICAL INFORMATION | # of Meters _____ | # of Conductors/PH _____ |
| SERVICE SIZE _____ | # of Transformers _____ | Size of Conductors _____ |
| ESR.# _____ | # of Fixtures or _____ | # of Neutrals _____ |
| <input type="checkbox"/> National Grid <input type="checkbox"/> NYSEG | Receptacle Outlets _____ | Size of Neutrals _____ |

REQUESTS FOR INSPECTION MUST BE MADE IN ADVANCE

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| <p>I, the undersigned property owner or authorized agent of the owner, am familiar with the requirements of the Workers Compensation Law and declare that (check the following):</p> <p><input type="checkbox"/> I have filed the required proof as affirmed by my insurance carrier.</p> <p><input type="checkbox"/> I have no people working directly for me and therefore require no Workers Compensation Insurance. Should there be any change in my status during the exercise of this permit, I will so advise the Building Department and comply with all requirements.</p> | <p>In consideration of granting this permit, the undersigned property owner or authorized agent of the owner hereby agrees to comply with the terms thereof, the Laws of the State of New York, the Ordinances of the Town of Amherst and the regulations of the various departments of the Town, County of Erie and the State of New York, request all necessary inspections and authorize and provide a means of entry to the premises for the Inspector. Furthermore, the undersigned property owner or authorized agent of the owner has read and will comply with these conditions. The undersigned property owner or authorized agent of the owner hereby certifies that all of the information in this petition is true and correct.</p> |
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| <p>PERMIT FEE: \$ _____ Make checks payable to: Town of Amherst (No cash)</p> | <p style="font-size: 2em; font-weight: bold;">X</p> |
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| <p>TOWN CLERK RECEIPT OF FEE:</p> <p>Receipt is hereby acknowledged of the sum of \$ _____ being the permit fee established by the Town Board of the Town of Amherst, NY.</p> <p style="text-align: right;">Town Clerk</p> | <p style="text-align: center;"><i>Registered Applicants Signature</i></p> <p style="text-align: center;">BUILDING DEPARTMENT APPROVAL:</p> <p>I do certify that a Code Enforcement Official has examined the foregoing application and supporting documentation and to the best of his/her knowledge has determined that they conform to the Ordinances of the Town of Amherst.</p> <p style="text-align: right;">Building Commissioner</p> |
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| <p>Issue Date: _____</p> <p>This permit expires six months from date of issue if work has not commenced.</p> | <p style="text-align: center;">NOTICE</p> <p style="text-align: center;">CONDITIONS, INSTRUCTIONS & REQUIRED INSPECTIONS</p> <p>The Building Department reserves the right to reject any work which has been concealed or completed without first having been inspected and approved by the department in accordance with the requirements of the various codes. Reasonable, safe access must be provided to all areas of the work.</p> <p style="text-align: center;">ALL REQUESTS FOR INSPECTION MUST BE MADE 24 HOURS IN ADVANCE</p> |
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PERMIT # BP-2025-

DIRECTIONS:**A. Enter the location for the work to be done.**

(Our jurisdiction is the entire Town of Amherst outside of the Village of Williamsville. Note that it may be confusing for some locations. For example most of the postal zone (14221) known as Williamsville is in the Town, but it also covers the Village of Williamsville, a portion of the Town of Clarence (not or jurisdiction) and a piece of the Town of Lancaster.)

When in doubt contact our office for an address verification.

B. Enter an estimate of the project cost.

(This item is very important as the computer system requires an estimated cost. Be as accurate as possible, but these can be approximate estimates. We Use this figure only for statistical purposes and as a guide for work load analysis since often the higher the project cost the greater the inspection time.)

C. Indicate when the work will be performed.

The contractor is responsible for scheduling the inspection. If the contractor does not schedule the inspection in a timely matter the property owner will Ultimately be held responsible.

D. Provide a description of the work.

1. For equipment installed outside on residential property a copy of a survey indicating the location of the equipment must be provided. If a copy of a survey is not available contact the building department for instructions.
For equipment installed outside on non-residential property a copy of a survey and/or copy of site plan approved by the Amherst Planning Department must be provided.
2. On residential properties no exterior heating or air-conditioning structure or equipment shall be located within three (3) feet of any lot line, in accordance with the Zoning Ordinance.
3. For equipment such as generators indicate the make, model and size of unit.
4. For interior equipment a plan or sketch indicating the location within the building must be provided
5. Manufacturers' installation instructions must be available to the inspector at the job site
6. All equipment must be installed in accordance with the manufacturers' installation instructions, the applicable International Codes, the National Electric Code and the NYS Uniform Code Supplement.
7. Smoke detectors must be installed in accordance with International Residential Building Code Section R314 and NYS Uniform Code Supplement.
8. Carbon monoxide detectors must be installed in accordance with International Residential Building Code Section R315 and NYS Uniform Code Supplement.

E. Workers Compensation & NYS Disability Insurance requirements

If insurance is not on file provide NYS attestation of exemption form CE-200 with each permit application.

Note: The full requirements for smoke and carbon monoxide detectors in residential construction is available at the Building Department Offices

This department is requiring a contractor or property owner to address these code matters in association with the issuance of any building, plumbing or electrical permits. Before a permit is issued, you will need to provide information as to how you are going to achieve compliance with the code.