



CITY OF NEW HOPE COMMUNITY DEVELOPMENT

4401 Xylon Ave N • New Hope MN 55428 • Phone: 763-531-5127 • Fax: 763-531-5136

• newhopemn.gov • newhopeinspections@newhopemn.gov

ELECTRICAL INSPECTION - HOMEOWNER

PROCESS

All electrical work is reviewed by Steve Togle. Contact him directly to schedule inspections.

www.togleinspections.com; (763) 390-9255 Mon – Fri: 7:00 – 8:30 AM

INCLUDE THE FOLLOWING ITEMS:

- ✓ Electrical Inspection Application (this sheet) filled out completely.
- ✓ Payment (see below)

Permit# _____

Received Application _____

Received Payment _____
For Office Use Only

PROPERTY INFORMATION

Property Address: _____

PROPERTY OWNER INFORMATION

Property Owner: _____ State: _____ Zip Code: _____

Contact Name: _____ Phone: _____

Address: _____ Email: _____

City: _____

WORK INFORMATION

☐ Addition ☐ Disconnect ☐ Electrical ☐ New ☐ Other ☐ Reconnect ☐ Remodel ☐ Repair ☐ Replace

Description of Work: _____

Is a Rough-In Required? ☐ Yes ☐ No

FEE SCHEDULE *THE FEE IS THE GREATER OF A OR B; NOT BOTH*

SECTION A - SERVICE & CIRCUIT CALCULATION				
WORK TYPE	DESCRIPTION	COST	QTY	TOTAL
New or Repair Service/Power Supply	Residential Panel Replacement	\$100 EA		
	Sub Panel	\$40 EA		
Feeders/Circuits	0-30 AMP	\$8 EA		
	31-100 AMP	\$10 EA		
	Additional 100 AMP	\$5 EA		
Generators	0-10 KVA	\$10 EA		
	11-74 KVA	\$40 EA		
	75-299 KVA	\$60 EA		
	299+ KVA	\$150 EA		
Swimming Pools	2 Trip plus Circuit Fees	\$100		
SECTION A TOTAL:				
SECTION B - TRIP CALCULATION				
Number of Trips	Minimum of 1 Trip Required	\$50 per Trip		
SECTION B TOTAL:				
*Residential minimum fee is \$50 and maximum is \$200 for 3 trips with a service of 200 AMP or less - includes new homes. No maximum if service is over 200 AMP.		(9001.4318) GREATER OF SECTION A OR B:		
		(9001.2383) STATE SURCHARGE:		\$1.00
		FEES DUE UPON APPLICATION:		



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NOTICE

Requests for electrical inspection (REI) with a fee of \$250 or less expire 12 months from the filing date. The owner must have the work completed within the 12-month period or submit another REI that includes the inspection fee for the uncompleted work. Inspection fees do not carry over from one REI to another. A service charge of \$30 will be added for all dishonored checks.

Signature: _____ **Date of Application:** _____

**By signing this document, I certify that I am the owner as defined by Minnesota Statue 326.01 and will legally perform the electrical work.*

PAYMENT

☐ **Check** (Make payable to City of New Hope. Mail Attn: Inspections Department to 4401 Xylon Ave N, New Hope, MN 55428)

☐ **Credit Card** (Fill in information below)

- Credit Card Number: _____ Expiration Date: _____
- Billing Address: _____
- Signature: _____ Name (Print): _____