



ELECTRICAL CONTRACTOR'S AFFIDAVIT

STATE OF WISCONSIN

New _____

County of _____ Acct# _____ Existing _____

_____, says that he is the person who (did) or (supervised) the following described work of wiring for electricity in the:

(specify building type) _____

Located at (add address) _____

and located in T. ___ N. R. ___ W. Section ___ In the town of _____, Wisconsin and that all of said described electric wiring at the location above was done so as to comply and does comply with; the Wisconsin State Electrical Code, has been inspected and approved by the appropriate Uniform Dwelling Code inspector, and that this Affidavit is made pursuant to and in compliance with the provisions of section 316.950 of the Statutes.

Description of wiring done _____

Electrician Signature

Electrician Inspector Signature

Date Installed _____

UDC – Certification Inspector Number

License # _____

Date Approved _____

Name and Address (Please Print)

Name and Address (Please Print)

Please check this box if service is exempt from UDC inspection.

Phone Number: _____

Phone Number: _____

Please return completed affidavit to:
Dunn Energy Cooperative
P.O. Box 220
Menomonie, WI 54751
Or by fax to 715-232-6244
Or by email to info@dunnenergy.com