

# ELECTRICAL PERMIT

## City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:  
 The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications:

Date \_\_\_\_\_  
 Permit # 2010-4743  
 CBL# 33-D-11

LOCATION: 88 Preble Street METER MAKE & # \_\_\_\_\_  
 CMP ACCOUNT # \_\_\_\_\_ OWNER \_\_\_\_\_  
 TENANT Salvation Army PHONE # \_\_\_\_\_

							TOTAL EACH FEE		
OUTLETS	6	Receptacles		Switches		Smoke Detector	.20	1.20	
FIXTURES		Incandescent	20	Fluorescent		Strips	.20	4.00	
SERVICES		Overhead		Underground		TTL AMPS <800	15.00		
		Overhead		Underground		>800	25.00		
Temporary Service		Overhead		Underground		TTL AMPS	25.00		
							25.00		
METERS		(number of)					1.00		
MOTORS		(number of)					2.00		
RESID/COM		Electric units					1.00		
HEATING		oil/gas units		Interior		Exterior	5.00		
APPLIANCES		Ranges		Cook Tops		Wall Ovens	2.00		
		Insta-Hot		Water heaters		Fans	2.00		
		Dryers		Disposals		Dishwasher	2.00		
		Compactors		Spa		Washing Machine	2.00		
		Others (denote)					2.00		
MISC. (number of)		Air Cond/win					3.00		
		Air Cond/cent				Pools	10.00		
		HVAC		EMS		Thermostat	5.00		
		Signs					10.00		
		Alarms/res					5.00		
		Alarms/com					15.00		
		Heavy Duty(CRKT)					2.00		
		Circus/Carnv					25.00		
		Alterations					5.00		
		Fire Repairs					15.00		
	2	E Lights					1.00	2.00	
		E Generators					20.00		
PANELS		Service		Remote		Main	4.00		
TRANSFORMER		0-25 Kva					5.00		
		25-200 Kva					8.00		
		Over 200 Kva					10.00		
TOTAL AMOUNT DUE									
MINIMUM FEE/COMMERCIAL 55.00							MINIMUM FEE	45.00	

RECEIVED  
 OCT 25 2010  
 Dept. of Building Inspection  
 City of Portland

CONTRACTORS NAME Seabee Electric MASTER LIC. # 60017768  
 ADDRESS 84 Pleasant Hill Rd. LIMITED LIC. # \_\_\_\_\_  
 TELEPHONE 883-5448

SIGNATURE OF CONTRACTOR \_\_\_\_\_

**ELECTRICAL INSTALLATIONS**

Permit Number \_\_\_\_\_

Location \_\_\_\_\_

Owner \_\_\_\_\_

Date of Permit \_\_\_\_\_

Final Inspection \_\_\_\_\_

By Inspector \_\_\_\_\_

INSPECTION: Service \_\_\_\_\_ by \_\_\_\_\_  
Service called in \_\_\_\_\_  
Closing-in \_\_\_\_\_ by \_\_\_\_\_

PROGRESS INSPECTIONS: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
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DATE:	REMARKS:
12/6/2010	2nd Floor Bathroom out to close in - Need Box extension
	For ceiling above ceiling, Plug needs rough in For Heat exchanger
	Above ceiling BKL

SEE 3