

ELECTRICAL PERMIT

City of Portland, Maine

To the 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's Electrical Ordinances, National Electrical Code and the following specifications:



Date: NOVEMBER 7, 2017

Permit #: 2017-04920

CBL#: 033 M001 001

ADDRESS: 63 PREBLE STREET 60 Elm Street

METER MAKE/MODEL #:

CMP Work Order #:

OWNER: GREATER PORTLAND HEALTH

TENANT: GPH - PREBLE ST CLINIC

PHONE #: 207-874-2141

PLEASE HAVE YOUR PERMIT # (OR JOB ID) READY & CALL 874-8703 TO SCHEDULE AN INSPECTION!

TOTAL EACH FEE

| | | | | | | | | |
|---------------------------|----|-----------------------------------|--------------------------|--------------------------------------|--------------------------|-----------------|-------|-------|
| OUTLETS: | 70 | Receptacles | 20 | Switches | | Smoke Detector | 0.20 | 18.00 |
| FIXTURES: | 8 | Incandescent | 70 | Flourescent | | Strips | 0.20 | 15.60 |
| SERVICES: | | <input type="checkbox"/> Overhead | <input type="checkbox"/> | <input type="checkbox"/> Underground | <input type="checkbox"/> | TTL Amps <800 | 15.00 | |
| | | | | | <input type="checkbox"/> | TTL Amps >800 | 25.00 | |
| TEMPORARY SERVICE: | | Overhead | <input type="checkbox"/> | Underground | | TTL Amps | 25.00 | |
| METERS: | | (Number of) | | | | | 1.00 | |
| MOTORS: | | (Number of) | | | | | 2.00 | |
| RESID/COMMER: | | Electric Units | | | | | 1.00 | |
| HEATING: | | Oil/Gas Units | <input type="checkbox"/> | Interior | <input type="checkbox"/> | Exterior | 5.00 | |
| APPLIANCES: | | Ranges | | Cook Tops | | Wall Ovens | 2.00 | |
| | | Insta-hot | 1 | Water Heaters | | Fans | 2.00 | 2.00 |
| | | Dryers | | Disposals | | Dishwasher | 2.00 | |
| | | Compactors | | Spa | | Washing Machine | 2.00 | |
| | | Others (denote) | | | | | 2.00 | |
| MISC. (# of): | | Air Cond (Window) | | | | | 3.00 | |
| | | Air Cond (Central) | | | | Pools | 10.00 | |
| | | HVAC | | EMS | | Thermostat | 5.00 | |
| | | Signs | | | | | 10.00 | |
| | | Alarms/Resident | | | | | 5.00 | |
| | 1 | Alarms/Commer | | | | | 15.00 | 15.00 |
| | | Heavy Duty (CRKT) | | | | | 2.00 | |
| | | Alterations | | | | | 5.00 | |
| | | Fire Repairs | | | | | 15.00 | |
| | 10 | Emergency Lights | | | | | 1.00 | 10.00 |
| | | Emer Generators | | | | | 20.00 | |
| | | Circus/Carnival | | | | | 25.00 | |
| PANELS: | | Service | 1 | Remote | | Main | 4.00 | 4.00 |
| TRANSFORMER: | | 0-25 Kva | | | | | 5.00 | |
| | | 25-200 Kva | | | | | 8.00 | |
| | | Over 200 Kva | | | | | 10.00 | |

RECEIVED
NOV 07 2017
Permitting & Inspections
City of Portland Maine

MINIMUM COMMERCIAL FEE: \$55.00

MINIMUM RESIDENTIAL FEE: \$45.00

TOTAL DUE: \$ 64.60

Brief Description of work:

RENOVATION OF HEALTH CLINIC

PLEASE HAVE YOUR PERMIT # (OR JOB ID) READY & CALL 874-8703 TO SCHEDULE AN INSPECTION!

CONTRACTOR INFORMATION:

Contractor Name: BRIAN H. MILLIKEN/B.H. MILLIKEN, INC. Master License #: MS60003604
 Address: 235 PRESUMPCOT ST, UNIT C, PORTLAND, ME 04103 Limited License #: _____
 Telephone & E Mail: (207) 879-1877 - ms@bhmilliken.com

Contractor Signature: Brian H. Milliken

PLEASE HAVE YOUR PERMIT # (OR JOB ID) READY & CALL 874-8703 TO SCHEDULE AN INSPECTION!

BP 2017-01290

CBL :