

# 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: 2/12/14  
 Permit #: 2014 00300  
 CBL#: 034A 0001

ADDRESS: 295 Forest Ave METER MAKE/MODEL #: \_\_\_\_\_  
 CMP Work Order #: \_\_\_\_\_ OWNER: Hannford Plaza  
 TENANT: Phuong Neang PHONE #: \_\_\_\_\_

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

TOTAL EACH FEE

OUTLETS:		Receptacles		Switches		Smoke Detector	0.20
FIXTURES:	<u>14</u>	Incandescent		Flourescent		Strips	0.20
SERVICES:		Overhead	<input type="checkbox"/>	Underground	<input type="checkbox"/>	TTL Amps <800	15.00
						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		Water Heaters		Fans	2.00
		Dryers		Disposals		Dishwasher	2.00
		Compactors		Spa		Washing Machine	2.00
		Others (denote)					2.00
		Air Cond (Window)					3.00
		Air Cond (Central)				Pools	10.00
MISC. (# of):		HVAC		EMS		Thermostat	5.00
		Signs					10.00
		Alarms/Resident					5.00
		Alarms/Commer					15.00
		Heavy Duty (CRKT)					2.00
		Alterations					5.00
		Fire Repairs					15.00
		Emergency Lights					1.00
		Emer Generators					20.00
		Circus/Carnival					25.00
PANELS:	<input type="checkbox"/>	Service	<input type="checkbox"/>	Remote	<input type="checkbox"/>	Main	4.00
TRANSFORMER:		0-25 Kva					5.00
		25-200 Kva					8.00
		Over 200 Kva					10.00

**RECEIVED**  
**FEB 14 2014**  
 Dept. of Building Inspections  
 City of Portland Maine

CBL :

MINIMUM COMMERCIAL FEE: \$55.00

MINIMUM RESIDENTIAL FEE: \$45.00

Brief Description of work:

**TOTAL DUE:**

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**CONTRACTOR INFORMATION:**

Contractor Name: WILLIAM JAMESON Master License #: MS40089666  
 Address: 49 ATLANTIC AVE Limited License #: \_\_\_\_\_  
 Telephone & E Mail: 207 749 1486

Contractor Signature: William Jameson

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