



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date 6 Dec 94, 19__
 Receipt and Permit number 13145

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 Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 1 Portland Sq (Brooks & Albin)
 OWNER'S NAME: Ptld sq Ltd ADDRESS: 6th St

OUTLETS: Receptacles 8 Switches _____ Plugmold _____ ft. TOTAL _____ FEES
 FIXTURES: (number of) Incandescent _____ Fluorescent _____ (not strip) TOTAL _____
 Strip Fluorescent _____ ft. _____

SERVICES: Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____
 METERS: (number of) _____
 MOTORS: (number of) _____

Fractional _____
 1 HP or over _____

RESIDENTIAL HEATING: Oil or Gas (number of units) _____
 Electric (number of rooms) _____

COMMERCIAL OR INDUSTRIAL HEATING: Oil or Gas (by a main boiler) _____
 Oil or Gas (by separate units) _____
 Electric Under 20 kws _____ Over 20 kws _____

APPLIANCES: (number of)
 Ranges _____ Water Heaters _____
 Cook Tops _____ Disposals _____
 Wall Ovens _____ Dishwashers _____
 Dryers _____ Compactors _____
 Fans _____ Others (denote) _____
 TOTAL _____

MISCELLANEOUS: (number of)
 Branch Panels _____
 Transformers _____
 Air Conditioners Central Unit _____
 Separate Units (windows) _____
 Signs 20 sq. ft. and under _____
 Over 20 sq. ft. _____
 Swimming Pools Above Ground _____
 In Ground _____
 Fire/Burglar Alarms Residential _____
 Commercial _____
 Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____
 over 30 amps _____
 Circus, Fairs, etc. _____
 Alterations to wires _____
 Repairs after fire _____
 Emergency Lights, battery _____
 Emergency Generators _____

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT INSTALLATION FEE DUE: _____
 FOR REMOVAL OF A "STOP ORDER" (304-16.b) DOUBLE FEE DUE: _____
 TOTAL AMOUNT DUE: 15.00

INSPECTION: Will be ready on 12-06, 19__; or Will Call _____
 CONTRACTOR'S NAME: EMI Steve Stuart
 ADDRESS: 16 Label Ave
 TEL: 797-4661
 MASTER LICENSE NO.: 13145
 LIMITED LICENSE NO.: _____
 SIGNATURE OF CONTRACTOR: [Signature]

INSPECTOR'S COPY — WHITE
 OFFICE COPY — CANARY
 CONTRACTOR'S COPY — GREEN