

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: 7.31.2013

Permit #: 2013-01661

CBL#: 170-D-3

ADDRESS: 33 sewall st Portland Me 04103

METER MAKE/MODEL # : _____

CMP Work Order #: _____

OWNER: Orthopedic Associates

TENANT: Orthopedic Associates

PHONE #: _____

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

TOTAL EACH FEE

OUTLETS:	12	Receptacles	2	Switches		Smoke Detector	0.20	2.80
FIXTURES:		Incandescent	3	Flourescent		Strips	0.20	.60
SERVICES:	<input type="checkbox"/>	Overhead	<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		Water Heaters		Fans	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	
		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:	<input type="checkbox"/>	0-25 Kva					5.00	
	<input type="checkbox"/>	25-200 Kva					8.00	
	<input type="checkbox"/>	Over 200 Kva					10.00	

CBL :

MINIMUM COMMERCIAL FEE: \$55.00

MINIMUM RESIDENTIAL FEE: \$45.00

\$55.00

Brief Description of work:

TOTAL DUE:

rennovation of consult rooms at Orthopedic Associates

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CONTRACTOR INFORMATION:

Contractor Name: ES Boulos Company (Tom Driscoll) Master License #: MS6000-3111

Address: 45 Bradley Drive Westbrook Maine 04092 Limited License #: _____

Telephone & E Mail: (207) 464-3706 ssaucier@esboulos.com

Contractor Signature:

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