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# 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 June 1, 2004  
 Permit # 2004-4550  
 CBL# 296 A 011

LOCATION: 263 WARREN AVE METER MAKE & # \_\_\_\_\_  
 CMP ACCOUNT # \_\_\_\_\_ OWNER Capozza Tile  
 TENANT \_\_\_\_\_ PHONE # 87-7635

							TOTAL	EACH FEE	
OUTLETS	10	Receptacles	5	Switches		Smoke Detector	.20	3.00	
FIXTURES	5	Incandescent	10	Fluorescent		Strips	.20	3.00	
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	10.00	
	1	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		
	1	Alterations					5.00	5.00	
		Fire Repairs					15.00		
	E Lights					1.00			
	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								21.00	
MINIMUM FEE/COMMERCIAL 45.00							MINIMUM FEE	35.00	45.00

DEPT. OF BUILDING INSPECTION  
 CITY OF PORTLAND, ME

JUN 3 2004

CONTRACTOR NAME Anthony Manoni MASTER LIC. # 2436  
 ADDRESS 179 Sheridan Street Portland, ME 04101 LIMITED LIC. # \_\_\_\_\_  
 TELEPHONE 774-5829

SIGNATURE OF CONTRACTOR Gino Manoni

White Copy - Office • Yellow Copy - Applicant

CK#3446

ELECTRICAL INSTALLATIONS—

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

Location \_\_\_\_\_

Owner \_\_\_\_\_

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

Final Inspection 63/15/14

By Inspector [Signature]

INSPECTION: Service \_\_\_\_\_ by \_\_\_\_\_

Service called in \_\_\_\_\_

Closing-in 06/01/07 by [Signature]

PROGRESS INSPECTIONS: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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DATE:

REMARKS:
