

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: May 21, 2016

Permit #: _____

CBL#: _____

ADDRESS: 23 West Commonwealth Dr METER MAKE/MODEL #: _____

CMP Work Order #: _____ OWNER: Hannah Santoro

TENANT: _____ PHONE #: 207-415-9989

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

TOTAL EACH FEE

OUTLETS:	<input type="checkbox"/>	Receptacles	<input type="checkbox"/>	Switches	<input type="checkbox"/>	Smoke Detector	0.20	6
FIXTURES:	<input type="checkbox"/>	Incandescent	<input type="checkbox"/>	Flourescent	<input type="checkbox"/>	Strips	0.20	
SERVICES:	<input type="checkbox"/>	Overhead	<input type="checkbox"/>	Underground	<input type="checkbox"/>	TTL Amps <800	15.00	
	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	TTL Amps >800	25.00	
TEMPORARY SERVICE:	<input type="checkbox"/>	Overhead	<input type="checkbox"/>	Underground	<input type="checkbox"/>	TTL Amps	25.00	
METERS:	<input type="checkbox"/>	(Number of)	<input type="checkbox"/>		<input type="checkbox"/>		1.00	
MOTORS:	<input type="checkbox"/>	(Number of)	<input type="checkbox"/>		<input type="checkbox"/>		2.00	
RESID/COMMER:	<input type="checkbox"/>	Electric Units	<input type="checkbox"/>		<input type="checkbox"/>		1.00	
HEATING:	<input type="checkbox"/>	Oil/Gas Units	<input type="checkbox"/>	Interior	<input type="checkbox"/>	Exterior	5.00	
APPLIANCES:	<input type="checkbox"/>	Ranges	<input type="checkbox"/>	Cook Tops	<input type="checkbox"/>	Wall Ovens	2.00	
	<input type="checkbox"/>	Insta-hot	<input type="checkbox"/>	Water Heaters	<input type="checkbox"/>	Fans	2.00	
	<input type="checkbox"/>	Dryers	<input type="checkbox"/>	Disposals	<input type="checkbox"/>	Dishwasher	2.00	
	<input type="checkbox"/>	Compactors	<input type="checkbox"/>	Spa	<input type="checkbox"/>	Washing Machine	2.00	
	<input type="checkbox"/>	Others (denote)	<input type="checkbox"/>		<input type="checkbox"/>		2.00	
MISC. (# of):	<input type="checkbox"/>	Air Cond (Window)	<input type="checkbox"/>		<input type="checkbox"/>		3.00	
	<input type="checkbox"/>	Air Cond (Central)	<input type="checkbox"/>		<input type="checkbox"/>	Pools	10.00	
	<input type="checkbox"/>	HVAC	<input type="checkbox"/>	EMS	<input type="checkbox"/>	Thermostat	5.00	
	<input type="checkbox"/>	Signs	<input type="checkbox"/>		<input type="checkbox"/>		10.00	
	<input type="checkbox"/>	Alarms/Resident	<input type="checkbox"/>		<input type="checkbox"/>		5.00	
	<input type="checkbox"/>	Alarms/Commer	<input type="checkbox"/>		<input type="checkbox"/>		15.00	
	<input type="checkbox"/>	Heavy Duty (CRKT)	<input type="checkbox"/>		<input type="checkbox"/>		2.00	
	<input type="checkbox"/>	Alterations	<input type="checkbox"/>		<input type="checkbox"/>		5.00	
	<input type="checkbox"/>	Fire Repairs	<input type="checkbox"/>		<input type="checkbox"/>		15.00	
	<input type="checkbox"/>	Emergency Lights	<input type="checkbox"/>		<input type="checkbox"/>		1.00	
	<input type="checkbox"/>	Emer Generators	<input type="checkbox"/>		<input type="checkbox"/>		20.00	
	<input type="checkbox"/>	Circus/Carnival	<input type="checkbox"/>		<input type="checkbox"/>		25.00	
PANELS:	<input type="checkbox"/>	Service	<input type="checkbox"/>	Remote	<input type="checkbox"/>	Main	4.00	
TRANSFORMER:	<input type="checkbox"/>	0-25 Kva	<input type="checkbox"/>		<input type="checkbox"/>		5.00	
	<input type="checkbox"/>	25-200 Kva	<input type="checkbox"/>		<input type="checkbox"/>		8.00	
	<input type="checkbox"/>	Over 200 Kva	<input type="checkbox"/>		<input type="checkbox"/>		10.00	

MINIMUM COMMERCIAL FEE: \$55.00

MINIMUM RESIDENTIAL FEE: \$45.00

Brief Description of work:

TOTAL DUE:

45.00

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CONTRACTOR INFORMATION:

Contractor Name: Jill H. Caron Master License #: MS60019033

Address: 92 Eastern Dr, Wales ME Limited License #: _____

Telephone & E Mail: _____

Contractor Signature: _____

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