Form # P 01

ELECTRICAL PERMIT
City of Portland, Me.

S/F #7 Steve

Gary 8/3 11:30

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 8/3/00
Permit # 6014
CBL# 299-D-021

SITE LOCATION: 57 Belfort Street

OWNER William Straight **TENANT** William Straight

							TOTAL	EACH	FEE
OUTLETS	Receptacles	8	Switches	4	Smoke Detectors	1		.20	2.40
FIXTURES	incandescent	5	fluorescent		Strips			.20	1.00
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	
	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	
	Alterations							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				
	MINIMUM FEE/COMMERCIAL 35.00				**MINIMUM FEE**			25.00	35.00

INSPECTION: Will be ready _____ or will call _____

CONTRACTORS NAME William Straight **MASTER LIC. #** _____
ADDRESS Same **LIMITED LIC. #** _____
TELEPHONE 878-5276 650-6624 (CELL)

SIGNATURE OF CONTRACTOR William Straight (Home owner)

ELECTRICAL INSTALLATIONS—

Permit Number _____

Location _____

Owner _____

Date of Permit _____

Final Inspection 03/18/11

By Inspector [illegible]

INSPECTION: Service _____ by _____

Service called in _____

Closing-in _____ by _____

PROGRESS INSPECTIONS: _____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

_____ / _____ / _____

DATE:	REMARKS:
8-17	2nd fl. wiring done by home owner looks O.K.
	One missing outlet @ right wall left bedroom.
	House has "NO GROUNDING" Told contractor
	that they need a Master Electrician to review their
	work + ground the house.