

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: 4/16/14
 Permit #: 2014-00756
 CBL#: 425-K-1

ADDRESS: 160 Presumpscot Dr METER MAKE/MODEL #: _____
 CMP Work Order #: 52767574 OWNER: DRAKE, James
 TENANT: DRAKE COURT PHONE #: _____

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
FIXTURES:	<input type="checkbox"/>	Incandescent	<input type="checkbox"/>	Flourescent	<input type="checkbox"/>	Strips	0.20
SERVICES:	<input checked="" type="checkbox"/>	Overhead	<input type="checkbox"/>	Underground	<input type="checkbox"/>	TTL Amps <800	15.00
	<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"/>	
	<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

RECEIVED
APR 16 2014
 Dept. of Building Inspections
 City of Portland Maine

CBL:

MINIMUM COMMERCIAL FEE: \$55.00 **MINIMUM RESIDENTIAL FEE: \$45.00**
 Brief Description of work: REPLACING RISEN CABLES **TOTAL DUE:** _____

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CONTRACTOR INFORMATION:

Contractor Name: JAMES LAWLEN Master License #: MS40010700
 Address: 59 WINDERS BRIDGE RD WUP IN Limited License #: _____
 Telephone & E Mail: JLAWLEN@ELECTIC@GMAIL.COM

Contractor Signature: _____

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