

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 _____
 Permit # 2009-4518
 CBL# 431-C-5

LOCATION: 29 Garrison 43 Watson METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER Warren Rowell
 TENANT _____ PHONE # _____

4518
 1519

						TOTAL EACH FEE	
OUTLETS	Receptacles		Switches		Smoke Detector	.20	
FIXTURES	Incandescent		Fluorescent		Strips	.20	
SERVICES	<input checked="" type="checkbox"/> Overhead		Underground		TTL AMPS <800	15.00	<input checked="" type="checkbox"/>
	Overhead		Underground		>800	25.00	
Temporary Service	Overhead		Underground		TTL AMPS	25.00	
						25.00	
METERS	<input checked="" type="checkbox"/> (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 55.00						MINIMUM FEE 45.00	<u>115.00</u>

CONTRACTORS NAME William Miles MASTER LIC. # M540089613
 ADDRESS 15 Bluffs Steep Falls ME LIMITED LIC. # _____
 TELEPHONE 207 831-0062

SIGNATURE OF CONTRACTOR [Signature]

ELECTRICAL INSTALLATIONS

Permit Number 20094518

Location 43 Wadsworth St

Owner Killy Roman

Date of Permit 9-10-09

Final Inspection 9-21-09

By Inspector [Signature]

INSPECTION: Service _____ by _____

Service called in _____

Closing-in _____ by _____

PROGRESS INSPECTIONS:

_____	/	_____	/	_____
_____	/	_____	/	_____
_____	/	_____	/	_____
_____	/	_____	/	_____
_____	/	_____	/	_____
_____	/	_____	/	_____
_____	/	_____	/	_____
_____	/	_____	/	_____
_____	/	_____	/	_____
_____	/	_____	/	_____

DATE:

REMARKS:

4-21-09 OK - service upgrade 100A OH by JEM

CONTRACTOR'S NAME: _____
 ADDRESS: _____
 TEL. PHONE: _____
 SIGNATURE: _____
 TITLE: _____
 MASTER LIC. _____
 LIMITED LIC. _____
 MINIMUM FEE COMMERCIAL \$5.00
 MINIMUM FEE \$5.00
 TOTAL AMOUNT DUE: _____
 MAIN: _____
 TRANSFORMER: _____
 SERVICE: _____
 0-25 KVA: _____
 25-300 KVA: _____
 Over 300 KVA: _____