



APPLICATION FOR PERMIT
 DEPARTMENT OF BUILDING INSPECTIONS SERVICES
 ELECTRICAL INSTALLATIONS

Date May 25, 19 77
 Receipt and Permit number A09993

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 Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: Lot # 109-B-B-1 Rear Island Ave. Cliff Island, Me.
 OWNER'S NAME: William Lunederg ADDRESS: same

OUTLETS: (number of) 1-30

Lights	_____	
Receptacles	_____	
Switches	_____	FEES
Plugmold	_____ (number of feet)	
TOTAL	_____	<u>3.00</u>

FIXTURES: (number of)

Incandescent	_____	
Fluorescent	_____ (Do not include strip fluorescent)	
TOTAL	_____	
Strip Fluorescent, in feet	_____	

SERVICES:

Permanent, total amperes	<u>200</u>	
Temporary	_____	<u>3.00</u>

MEIERS: (number of) 150

MOTORS: (number of)

Fractional	_____	
1 HP or over	_____	

RESIDENTIAL HEATING:

Oil or Gas (number of units)	_____	
Electric (number of rooms)	<u>9</u>	<u>9.00</u>

COMMERCIAL OR INDUSTRIAL HEATING:

Oil or Gas (by a main boiler)	_____	
Oil or Gas (by separate units)	_____	
Electric (total number of kws)	_____	

APPLIANCES: (number of)

Ranges	_____	Water Heaters	_____
Cook Tops	_____	Disposals	_____
Wall Ovens	_____	Dishwashers	_____
Dryers	<u>x</u>	Compactors	_____
Fans	_____	Others (denote)	_____
TOTAL	_____		<u>1.50</u>

MISCELLANEOUS: (number of)

Branch Panels	_____	
Transformers	_____	
Air Conditioners	_____	
Signs	_____	
Fire/Burglar Alarms	_____	
Circus, Fairs, etc.	_____	
Alterations to wires	_____	
Repairs after fire	_____	
Heavy Duty, 220v outlets	_____	
Emergency Lights, battery	_____	
Emergency Generators	_____	

INSTALLATION FEE DUE: _____
 FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT DOUBLE FEE DUE: _____
 FOR REMOVAL OF A "STOP ORDER" (304-15.b) _____
 FOR PERFORMING WORK WITHOUT A PERMIT (304-9) _____
 TOTAL AMOUNT DUE: 17.00

INSPECTION:
 Will be ready on _____, 19____; or Will Call x

CONTRACTOR'S NAME: P. A. Gomez
 ADDRESS: Chesapeake Island, Me.
 TEL.: 846-4110

MASTER LICENSE NO.: 4676 limited license SIGNATURE OF CONTRACTOR: _____
 LIMITED LICENSE NO.: _____

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APPLICATION FOR PERMIT
 DEPARTMENT OF BUILDING INSPECTIONS SERVICES
 ELECTRICAL INSTALLATIONS

Date Sept. 26, 19 77
 Receipt and Permit number A03239

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 Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: Lot # 109-B-4 Isl Ave. Cliff Island
 OWNER'S NAME: Margaret Newcomb ADDRESS: same

OUTLETS: (number of)
 Lights _____
 Receptacles _____ FEES
 Switches _____
 Plugmold _____ (number of feet)
 TOTAL _____

FIXTURES: (number of)
 Incandescent _____
 Fluorescent _____ (Do not include strip fluorescent)
 TOTAL _____
 Strip Fluorescent, in feet _____

SERVICES:
 Permanent, total amperes 100 3.00
 Temporary _____

METERS. (number of) 150

MOTORS: (number of)
 Fractional _____
 1 HP or over _____

RESIDENTIAL HEATING:
 Oil or Gas (number of units) _____
 Electric (number of rooms) _____

COMMERCIAL OR INDUSTRIAL HEATING:
 Oil or Gas (by a main boiler) _____
 Oil or Gas (by separate units) _____
 Electric (total number of kws) _____

APPLIANCES: (number of)
 Ranges _____ Water Heaters _____
 Cook Tops _____ Disposals _____
 Wall Ovens _____ Dishwashers _____
 Dryers _____ Compactors _____
 Fans _____ Others (denote) _____
 TOTAL _____

MISCELLANEOUS: (number of)
 Branch Panels _____
 Transformers _____
 Air Conditioners _____
 Signs _____
 Fire/Burglar Alarms _____
 Circus, Fairs, etc. _____
 Alterations to wires _____
 Repairs after fire _____
 Heavy Duty, 220v outlets _____
 Emergency Lights, battery _____
 Emergency Generators _____

INSTALLATION FEE DUE: _____

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT DOUBLE FEE DUE: _____

FOR REMOVAL OF A "STOP ORDER" (304-16.b) _____

FOR PERFORMING WORK WITHOUT A PERMIT (304-9) _____

TOTAL AMOUNT DUE: 3.50

INSPECTION:
 Will be ready on 9-26, 19 77 or Will Call _____

CONTRACTOR'S NAME: P. A. Gomez
 ADDRESS: Chebeague Island
 TEL.: 846-4110

MASTER LICENSE NO.: 4676
 LIMITED LICENSE NO.: _____

SIGNATURE OF CONTRACTOR:

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