Electrical Permit # _____ Sec._____ Blk._____ Lot_____

APPLICATION FOR NEW OR EXTENDED ELECTRIC SERVICE
TOWN OF PORTLAND
(PLEASE PRINT CLEARLY AND FILL IN ALL BLANKS)

NAME AND MAILING ADDRESS

_____

_____

_____

(Phone)_____ (Cell)_____

GENERAL CONTRACTORS INFORMATION

_____

_____

_____

(Phone)_____ (Cell)_____

WORKER'S COMPENSATION POLICY # _____
(Copy of Policy or an approved Affidavit must be on file prior to issuance of the Permit)

PROPOSED WORK: New Service Alteration to an existing service

DESCRIPTION OF PROJECT: Single Phase Three Phase

Size of New Service in Amps:_____

Voltage: 120/240 120/208 277/480 4800/320Y

Single Family Multi-Family Commercial

Will any additional electric meters be required? _____

List any single loads in excess of 2,000 watts: _____

Describe the type of work to be performed: _____

_____

_____

Name of Electrical Inspector: _____

SIGNATURES: The above information is accurate to the best of my knowledge:

Owner of Property: _____
(Signature) **DATE**

Applicant: _____
(Signature) **DATE**

_____

BUILDING INSPECTOR DATE