

STATE OF RHODE ISLAND
ELECTRICAL PERMIT APPLICATION

MUNICIPALITY CHARLESTOWN ISSUED _____ NUMERICAL CODE _____ PERMIT NO. _____
 APPLICATION DATE _____ CENSUS TRACT _____ FEE RECEIVED: \$ _____ BY _____

1. STREET LOCATION _____ POLE NO. or UNDERGROUND NO. _____
 2.3.4. PARCEL ID _____ 5. FLOOR LOCATION _____
 6. USE OF STRUCTURE PREVIOUS _____ PROPOSED _____
 7. _____ Temporary _____ New Installation _____ Change of Service Starting Date _____ SRE # _____
 8. OWNER _____ TEL. NO. _____
 9. ELECTRICAL CONTRACTOR _____ TEL. NO. _____
 10. ARCH. OR ENG. _____ ADDRESS _____ TEL. NO. _____
 11. STAMPED PRINTS YES NO 12. RHODE ISLAND REG. NO. _____ 13. CONTRACTOR'S LIC. NO. _____
 14. DESCRIPTION OF WORK TO BE PERFORMED _____

15. Service entrance voltage _____ Amperage _____ Phase _____ No. of Meters _____
 16. Wire size (cu. or al.) _____ Conductor Per Phase _____
 17. Estimated Load: Electrical Heat _____ k.w. Lights _____ k.w. Range _____ Dryer _____ Motors, H.P., Phase _____
 18. ESTIMATED COST OF COMPLETED INSTALLATION: \$ _____

MUNICIPAL ELECTRICAL PERMIT FEE: = \$ _____
 CE & ADA FEE : _____ x .001 = \$ _____
 ESTIMATED COST x .001 = \$ _____
 (1 & 2 FAMILY DWELLINGS LIMITED) TOTAL PERMIT FEE = \$ _____
 TO CE & ADA FEE OF \$50.00

I hereby certify that I have the authority to make the foregoing application, that the application is correct, and that the owner of this building and the undersigned agree to conform to all application codes and ordinances of the municipality

ELECTRICAL CONTRACTOR'S SIGNATURE _____

DO NOT WRITE BELOW THIS LINE ELECTRICAL WIRING PERMIT

PERMIT GRANTED:
 DATE _____
 BY _____
 ELECTRICAL INSPECTOR

CERTIFICATE OF INSPECTION

To the Electric Utility Company: The installation described above has been inspected and approval is granted for connection to your service. DATE _____

 ELECTRICAL INSPECTOR