Z3 Consultants Inc.

Electrical Form

PO Box 363 LaGrangeville, NY 12540 Phone (845) 471-9370 Fax (845) 625-1479 Se Habla Español Effective April 2017

	PERM	IT REQ	UIRED?	YE	S	NO	UTI	LITY (COMPA	NY:					
-	ELECTRICAL PERMIT #								PRE-APPROVAL DATE:						
•	EXISTING METER #							FINAL INSPECTION DATE:							
SERVICE REQUEST#								FINAL SENT TO UTILITY DATE:							
SPECIAL NOTES:								FINAL SENT TO AHJ DATE:							
	COUNTY: MUNICIPALITY: PROJECT ADDRESS:														
											DI	ONE #	1-		
APPLICANT/OWNER: PHONE #: EMAIL/FAX REPORT TO:															
ENIA	EMAIL/FAA KLI UKI TU.														
	Des	criptio	n:												
Electrical: Electrical Survey:								Low Voltage:							
Electrical.						ar Sur vey	•	Low voltage.							
NEW	EX	ISTING	COMMERCIA	L RESIDI	ENTIAI	L BASEMENT	1 ST FLO	OR 2 ^N	FLOOR	3 RD FL	OOR G	ARAGE	ATTIC	OTHER	
DECEDI	FACLES	<u> </u>	TELEDIA	NIE.		WATED HE	ATED.	COM	DO CO/6:	MOKE		IACUZ	ZI TUB:		
RECEPTACLES: TELEPHONE SWITCHES: ARC FAULT:								R: COMBO CO/SMOK CO2 ALARM:			:	DRYER			
LIGHTING: CABLE:					AIR HANDLER:			SMOKE ALARM:				A/C COMP:			
GFCI: PADDLE FAY OTHER EQUIPMENT:				FANS:	NS: RANGE:			FRACTIONAL FAN:				ELECTRIC HEAT:			
					03.5		4.0								
	New Service Nu			umber o	mber of Meters Cha			ge of Service		Underground			Overhead		
				1							D.I				
	CDI	₹ -		AMPS	<u>S</u> -		Volta	ige -			Phase -				
FAILED TO COMPLY WITH THE UNIFORM CODE															
FAIL	ED DAT	ГЕ -						CORRECTED DATE -							
OFFICIAL USE ONLY:															
	SERVICE PANEL EQUIPMENT BP CARD WINDOW Article #														
INSPECTOR'S INITIALS ROUGH WIRE DATE INSPECTOR'S INITIALS FINAL WIRE DATE										ΓE					
												\dashv			
					e e	ATICEACT	ODV AS	COMP	I ETED						
	CERTIE	CATE OF	COMPLIAN	CE	34			Y AS COMPLETED PS SIGNATURE DATE							
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