DO NOT WRITE HERE - FOR OFFICE USE ONLY	THE INSPECTOR	CERTIFICATE #
	TEMP. # / DATE	BUILDING PERMIT #

CITY OR VILLAGE	ZIP CODE	TOWNSHIP	COUNTY
STREET # AND OR ROAD			Pole Number
Additional helpful directions	Section	Block	Lot
OCCUPANTS NAME	BUILDING OCCUPANCY		
OWNER'S NAME & ADDRESS		HOME TELEPHONE	
CURRENT SUPPLIED BY	FROM THEIR OFFICE	WORK TELEPHONE	

BUILDING IS	NEW	OLD	
WORK IS	NEW	ADDITIONAL	DEFECTS REMOVED

Inspection or Electrical Premises Survey: We have attended at the premises named herein to inspect the electrical installation and regret that we can not issue a certificate of compliance for the reason(s) listed hereunder:

___ Concealed work not exposed suffiently for inspection.
___ Installation not completed sufficiently for inspectiion.
___ Additional work observed with no application for inspection being filed.
___ Installation not in compliance with the NEC for reasons listed hereunder.

Key: Code number printed under column A listed below combined with code number printed under column B listed below indicates condition.

NEC VIOLATIONS	Level	NEC VIOLATIONS	Level	NEC VIOLATIONS	Level	NOTES

INSPECTION	INSPECTION	INSPECTION

Size of service		APPLICANT ATTESTS THAT THERE IS NO OTHER APPLICATION PENDING WITH A QUALIFIED ELECTRICAL INSPECTION AUTHORITY, FOR INSTALLATION LISTED HEREIN. THIS APPLICATION IS VALID FOR A PERIOD NOT EXCEEDING ONE YEAR FROM THE DATE RECEIVED.
Feeders		
Work is exposed		
Work is concealed		
Service enters the structure overhead		MUST ENTER APPLICANTS IDENTIFICATION NUMBER
Service enters the structure underground		
Date inspection requested		

PLEASE GIVE FULL AND ACCURATE INFORMATION. ALL SPACES MUST BE FILLED OR APPLICATION MAY BE RETURNED.

PRINT NAME AND ADDRESS

NAME OF APPLICANT	DATE OF APPLICATION	SIGNATURE OF APPLICANT
STREET ADDRESS		TELEPHONE #
CITY OR POST OFFICE		LICENSE NUMBER

1-800-487-0535
www.theelectricalinspector.com
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Chateaugay, New York 12920