

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

GENERAL CONTRACTORS INFORMATION

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Phone) \_\_\_\_\_ (Cell) \_\_\_\_\_

(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