

ELECTRICAL PERMIT



Notice: Work may be performed ONLY by a licensed Master Electrician or the Owner/ Occupant of a single family dwelling. No wiring shall be covered or concealed until it has been inspected and approved by the electrical inspector. Notification for inspection must be given at least **48 hours** in advance.

* All work to conform to the current adopted edition of the NEC at the time of doing work.
 * Double permit fees will be assessed for any work started prior to the issuance of a permit.

Date: _____

CMP WO #: _____

Will call when available if not at time of permit

Owner: _____

Inspection Date: _____

* Will call when ready (48 Hour notice)

Phone #: _____

Job Address: _____

Map / Lot #: _____

Electrician: _____

Lic. #: _____

Signature: _____

Phone #: _____

***** Description of Work:**

New	<input type="checkbox"/>	
Repair	<input type="checkbox"/>	
Rmdl/Alt.	<input type="checkbox"/>	
Other	<input type="checkbox"/>	

Fee Schedule: Minimum permit fee = \$35 Re-inspection Fee = \$25 Fee
 * all permit fee's are paid directly to the Electrical Inspector

New Residential	.05 per sf	Total sf = <input style="width: 100%;" type="text"/>	\$ <input style="width: 100%;" type="text"/>
New Commercial	.07 per sf	Total sf = <input style="width: 100%;" type="text"/>	\$ <input style="width: 100%;" type="text"/>
New Warehouse/Indust.	.03 per sf	Total sf = <input style="width: 100%;" type="text"/>	\$ <input style="width: 100%;" type="text"/>
Garage / Utility	.03 per sf	Total sf = <input style="width: 100%;" type="text"/>	\$ <input style="width: 100%;" type="text"/>
Repair / Remodel / Alteration	Minimum fee (30 openings)+ \$25 per 30 openings		\$ <input style="width: 100%;" type="text"/>
Pools/Spas/Hot tubs	Minimum fee		\$ <input style="width: 100%;" type="text"/>
Low voltage / Alarms / Smoke	Minimum fee		\$ <input style="width: 100%;" type="text"/>
Service Entrance up to 200 amp.	Minimum fee	Over 200 amp. = Minimum fee + \$25	\$ <input style="width: 100%;" type="text"/>
Other	Minimum fee + TBD (Based on description of work)		\$ <input style="width: 100%;" type="text"/>

Owner copy: _____
 Town copy: _____
 Electrical Inspector copy: _____

Town of Lisbon
 300 Lisbon Street
 Lisbon, Maine 04250
 207-353-3000 Ext. 111

Electrical Inspector: Ron Roy

Contact #: 353-6753