

Public Safety Technical Inspection Services

## **APPLICATION FOR ELECTRICAL WIRING PERMIT**

PO Box 6000 Fredericton, NB E3B 5H1 Phone: (506) 453-2336

Cito	Dormit	Plan	
Site	Permit	Pian	
No.	No.	No.	

Property Location	10	0/06	Fax: (506)	) 457-7	394		No	) <b>.</b>				N	0.				No.		
Civic No.   Street/Hwy   Postal Code   Municipality   Prov.   Street/Hwy   Prov.	Building Construction New		Exis	sting	Building Permit V			Vaiver			Buil	Building Permit No.							
Municipality	Property Location PID No.				Property Owner						/ner								
Building Name   Building Usage	Civic No.	Street/Hwy								Civic No.			Street/Hwy						
Building Name  Building Ware  (I different from property, owner)  (I different from property, building owner)  (I different from from from from from from from from	Municipality	<u>'</u>				Code				Munic	ipality						Prov.		
Building Owner (If different from property owner)   City (No.   Street/Hwy   Prov.   Municipality   Prov.   Prov.   Municipality   Prov.   Prov				<u> </u>					Postal Code			Telephone							
It different from property owner)	<b>Building Name</b>	•								Buile	ding U	sage							
Critic No.   Street/Hwy   Prov.   Municipality   Prov.   Municipality   Prov.   Prov.	Building Owner Occupancy Owner																		
Municipality   Prov.   Municipality   Prov.   Postal Code   Telephone   Postal Code   Telephone    Coupany Name   Occupancy Usage   Floor/Suite No.    Contractor   Lic.   No.   Site Electrician   Lic.   No.   No.   No.   No.   No.   Site Electrician   Lic.   No.   No.   No.   No.   OH   Change Over   Disconnect/Reconnect   Temp. for Construction   Service Entrance Only   Existing   UG   Relocate   Emergency Repair   Temp. for Shows   CSA or WP #	· ·	if different from property/building owner) (if different from property/building owner)																	
Postal Code   Telephone   Place   Pl			7110001111	<u>,                                    </u>	Prov.						itv		7110001	1449			Prov.		
Contractor    Contractor   Cont			Τε	elepho						-	-			Tele	phone	1	1		
Lic.   No.   Site Electrician   Lic.   No.   No.	Occupany Nan	ne						Occup								oor/S	Suite No		
Main Service   High Voltage Service   Volts   Amps   Phase	lie lie																		
COMPLETE FOR ALL INSTALLATIONS INVOLVING FEEDER OR BRANCH CIRCUITS ONLY, (NO CHANGE TO SERVICE) Total Rating of New or Replaced Equipment    NaB Power District   Phase   Phas	No. Site Electrician No.																		
New																			
Existing				Пс	hange O	ver [	7 Disc				$\overline{}$				n F	] Se	ervice Fn	trance (	Only
Main Service  High Voltage Service  Volts  Amps  Phase    COMPLETE FOR INSTALLATIONS HAVING SUB-METERING  Residential  Non-Residential  Non-Residential  Residential  Non-Residential  Residential  Residential Residential  Residential Residen	=	=				Г	_					•						lianoo .	Jy
COMPLETE FOR INSTALLATIONS HAVING SUB-METERING																			
New																			
Existing	□ No	<del></del>							V					Now	$\overline{}$				Phase
COMPLETE FOR ALL INSTALLATIONS INVOLVING FEEDER OR BRANCH CIRCUITS ONLY, (NO CHANGE TO SERVICE)  Total Rating of New or Replaced Equipment															,				
Total Rating of New or Replaced Equipment  Volts   Amps   Phase   Volts   Amps   Phase   Volts   Amps   Phase   Phase		TE FOR	ALL ING	TALL	ATIONIC	L INIVOI	VINO	FFFDF	D 0	D D A	NOLLO					ANIOF	- TO 05	:D)//OF	
COMPLETE FOR ALL INSTALLATIONS (INCLUDE SERVICE INFORMATION WHERE APPLICABLE)  Supply Authority  NB Power	Total Rating of New Volte Ames Bhase								LT, (I		ANGE			)					
COMPLETE FOR ALL INSTALLATIONS (INCLUDE SERVICE INFORMATION WHERE APPLICABLE)  Supply Authority	or Replaced Equipment																		
Supply Authority	Description of	Work to	r All Ins	tallatio	ons														
Supply Authority																			
Supply Authority																			
Supply Authority		COME	PLETE F	OR AL	L INST	ALLATI	ONS (	INCLUE	E S	ERVIC	E INFO	RMAT	ION W	/HERE	APPL	ICAB	BLE)		
District	ND Davies Design Commission City of Death Andreas																		
Supply Authority Information       Estimated Distance of Overhead Service Loop From Service Location to Closest Pole         Heating Type (check all that apply)       Electric Baseboard       Electric furnace       Heat Pump       Other         Proposed Location of Meter on Building       Back       Front       Left Side       Right Side         Alternate Energy Source (if applicable)       Solar PhotoVoltaic       Wind Turbine       Micro Turbine       Other       (ie Fuel Cell)         Permit Remarks for Utility         Utility Approval No.       Special Permission No.       Job       Est. Start Date       Requested Connection       Est. Completion Date	Supply Authority	,	<del>-</del>								Edmundston Light Commission								
Heating Type (check all that apply)    Electric Baseboard   Electric furnace   Heat Pump   Other   Proposed Location of Meter on Building   Back   Front   Left Side   Right Side     Alternate Energy Source (if applicable)   Solar PhotoVoltaic   Wind Turbine   Micro Turbine   Other(ie Fuel Cell)    Permit Remarks for Utility	Installation designed by engineer - Name: Installation will be inspected by others																		
Proposed Location of Meter on Building Back Front Left Side Right Side  Alternate Energy Source (if applicable) Solar PhotoVoltaic Wind Turbine Micro Turbine Other (ie Fuel Cell)  Permit Remarks for Utility  Utility Approval No. Special Permission No. Job Est. Start Date Requested Connection Est. Completion Date	Supply Authority Information Estimated Distance of Overhead Service Loop From Service Location to Closest Pole																		
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	Permit Remarks for Utility																		
Schedule	Utility Approval No. Special Permission No. <b>Job</b> Est. Start Date Requested Connection Est. Completion Date																		
Contractor's Signature Date	Contractor's Signature					Schedule					Deto								