

CITY OF LEBANON - BUILDING PERMIT APPLICATION
SUPPORT STATEMENT FOR ELECTRICAL PERMIT

1. Property Owner: _____ Tel.# _____

2. Project Location:

Tax Map:	Lot:	Plot:	Zoning District:
Location (Physical Address):			

3. Electrical Service Information

Complete the Following for ALL Electrical Projects:

Capacity: (Amps)	Class of Use: <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial
Service Voltage: <input checked="" type="checkbox"/> 240/120 <input type="checkbox"/> 208/120 <input type="checkbox"/> 480/277	Other: _____
Number of Meters: _____	
National Grid Sequence (job) Number if Applicable: _____	
Please Note: You must Contact National Grid For Sequence Number Prior to Service Work. Call 800-322-3223 x54020. Ask for a Service Request.	

4. Electrical Project details: (Check All That Apply)

<input type="checkbox"/> New Service	<input type="checkbox"/> Upgrade Service	<input type="checkbox"/> Modification to Existing Service	
Project Includes: <input checked="" type="checkbox"/>			
<input type="checkbox"/> Branch Circuits	<input type="checkbox"/> UPS/Inverter	<input type="checkbox"/> Well Pump	<input type="checkbox"/> Site Lighting
<input type="checkbox"/> Feeders	<input type="checkbox"/> Transformer	<input type="checkbox"/> Out Building	<input type="checkbox"/> Illuminated Sign
<input type="checkbox"/> Sub Panels	<input type="checkbox"/> Generator	<input type="checkbox"/> Solar System	<input type="checkbox"/> Swimming Pool
Wiring Method: <input checked="" type="checkbox"/> NM (rx) <input type="checkbox"/> MC <input type="checkbox"/> AC(bx) <input type="checkbox"/> EMT <input type="checkbox"/> RNC (pvc) <input type="checkbox"/> RMC (rigid)			
Description:			

5. Electrical Contractor Information:

Company: _____	Contact Person: _____
NH License #: _____	Phone #: _____
E-Mail: _____ @ _____	

FOR OFFICE USE ONLY

File# _____ Permit# _____ Date Service Energized: _____