

TOWN OF PLAINVILLE

REQUEST FOR ELECTRICAL INSPECTION

Please fill out the following information when requesting an electrical inspection and mail or fax to the following address: **Town of Plainville, Electrical Inspector, P. O. Box 1717, Plainville, MA 02762.**

Should you have any questions, please call 508-695-3010 ext. 41 or Fax Number 508-695-1857

Date _____

Permit # _____

Mandatory

I, _____ hereby request an inspection under

(license holder)

Massachusetts General Laws, Chapter 143, Section 3L and CMR 4.02 (3)

PROPERTY LOCATED AT: _____

_____ Temporary Service
(Date Requested)

_____ Permanent Service
(Date Requested)

_____ Underground/Trench
(Date Requested)

_____ Rough Inspection
(Date Requested)

_____ Final Inspection
(Date Requested) _____ Other (Please Specify)
(Date Requested)

Nature of Electrical Work: _____

Name of Licensee: _____ Phone # of License _____

Address of Licensee _____

Comments: _____

SPACE RESERVED FOR THE TOWN OF PLAINVILLE, INSPECTOR'S OFFICE – DO NOT WRITE BELOW THIS LINE

Date Inspected _____

Pass _____

Fail _____

The following are Sections and Articles of the Massachusetts Electric Code CMR 527, Section 12.00 that did not meet the minimum installation requirements.

Electrical Inspector for the Town of Plainville _____

Note: When an inspection is requested and the work is not ready, the premises are locked or not accessible by means of a set of stairs or is not acceptable, a re-inspection fee of \$25.00 will be charged. This fee is to be paid at the Town Hall prior to the inspection.

Premises must be unlocked and access available after 48 hours of initial inspection call.