DIVISION OF BUILDINGS, D.P.W.
TOWN HALL
GREENWICH, CONN. 06830
PHONE: 622-7754

APPLICATION FOR ELECTRICAL WORK

The undersigned hereby applies for a permit to perform electrical work as listed herein and agrees to conform strictly to the State Building Code and to promptly give notice to this office when work is ready and accessible and available for roughing and final inspections.

Name of Building Owner ........................................................ Mailing Address .......................................................... Street
......................................................................................... (N. S. E. W.) Side of nearest cross street.
......................................................................................... Address
......................................................................................... Number of family units now
......................................................................................... Number of family units to be

Value of the Work $.................................. Permit Fee $.........
Amend No. .................................. Amend Fee $.............
Zoning Approved By .........................................................
Application Approved By ..............................................

CONTRACTOR INFORMATION

CONTRACTOR INFORMATION

PERMITTEE (print) ________________ (Signature)

Address ___________________________________________________

City ____________________ Zip __________ Phone No. _______________

ATTACH LETTER PER P.A. 91-95
FOLLOWING TO BE COMPLETED BY PERMITTEE
NEW TO BE WIRED

Total number of devices installed (includes switches, outlets, light fixtures, etc.)

<table>
<thead>
<tr>
<th>List Proposed</th>
<th>New Appliances and Loads</th>
</tr>
</thead>
<tbody>
<tr>
<td>Range</td>
<td>Range Top</td>
</tr>
<tr>
<td>Oven</td>
<td>Dish Washer</td>
</tr>
<tr>
<td>Clothes Dryer</td>
<td>Water Heater</td>
</tr>
<tr>
<td>Air Conditioner</td>
<td>Attic/Large Fan</td>
</tr>
<tr>
<td>Oil Burner</td>
<td>Gas Burner</td>
</tr>
<tr>
<td>Circulator Motor</td>
<td>Well Pump</td>
</tr>
<tr>
<td>Electric Heat</td>
<td>Pool Equipment</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Existing Appliance Loads</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cooking</td>
</tr>
<tr>
<td>Water Heater</td>
</tr>
<tr>
<td>Dryer</td>
</tr>
<tr>
<td>Air Conditioner</td>
</tr>
</tbody>
</table>

**ELECTRICAL SERVICE INFORMATION**

CL&P CRS #    

<table>
<thead>
<tr>
<th>Size of Electrical Service</th>
<th>Existing</th>
<th>Proposed</th>
</tr>
</thead>
</table>

(If over 400 amps attach load breakdown from CT registered PE)

<table>
<thead>
<tr>
<th>No. of Elect. Meters on Property</th>
<th>Existing</th>
<th>Proposed</th>
<th>Total</th>
</tr>
</thead>
</table>

Location of Meter(s):  

- [ ] Main Building (Dwelling)
- [ ] Accessory Structure
- [ ] Remote Location (Attach plot plan)

(Note: If additional meter is proposed Zoning Approval is required)

**LOCATION AND DESCRIPTION OF WORK**

Required to be filled out by the permittee as listed on the front of this application. Incomplete forms will not be accepted. (Please Print)

**OWNER AUTHORIZATION**

(Only required if not filed under a Bldg. Permit (SEC 29-263 CGS)

I hereby state that I am the owner of the property listed on the front of this application and hereby authorize the agent listed below to act on my behalf to complete and file this application for the work listed herein.

OWNER: ___________________________ (print)

OWNER: ___________________________ (signature)

AGENT (contractor): ________________ (print)

AGENT (contractor): ________________ (signature)

**PERSONS PERFORMING THE WORK**

Project Supervisor/Foreman: ___________________________

<table>
<thead>
<tr>
<th>CT License #</th>
<th>License Type</th>
</tr>
</thead>
</table>

List other employees on job with license information

1. ___________________________ License Type ________________

2. ___________________________ License Type ________________

<table>
<thead>
<tr>
<th>CT License #</th>
<th>License Type</th>
</tr>
</thead>
</table>

(Note: If remote equipment proposed Zoning Approval is required)
Fire & Security Alarm Permit

New Dwellings
Total number of devices installed _______________ Total number of bedrooms _______________

No. of Smoke Alarms ____________ No. of CO Detectors ____________ No. of Heat Detectors ____________
Make & Models

Add/Alter Dwellings
Total number of devices installed _______________ Total number of bedrooms _______________

Hardwired devices
No. of Smoke Alarms ____________ No. of CO Detectors ____________ No. of Heat Detectors ____________
Make & Models

Non-hardwired devices
No. of Smoke Alarms ____________ No. of CO Detectors ____________ No. of Heat Detectors ____________
Make & Models

Security
Total number of devices installed _______________
Description of work

Permittee: ___________________________ CT Lic. No. ___________________________

Signature: ___________________________ Date: ___________________________