

Commonwealth of Massachusetts Department of Fire Services BOARD OF FIRE PREVENTION REGULATIONS

•	-	
	/ENITION	ATIMINE

	Official Use Only	
Permit No.		
	and Fee Checked	
Rev. 1/07]	(leave blank)	

APPLICATION FOR PERMIT TO PERFORM ELECTRICAL WORK

		in accordance with the Massa		ode (MEC),	527 CMR 1	2.00	
(PLEASE PRINT IN L	NK OR TYPE	ALL INFORMATION)	Date:		CTI		
City or Tow	n of:	res notice of his or her inten	To the In	nspector (of Wires:	ihed helow	
					WOLK GCSCI	ioca ociow.	
•	•••			-	Janhona N	0.	
Owner or Tenant					dephone is	.0.	
Owner's Address		T.7		(Chao	l. Annuan	niata Ray)	
Is this permit in conju	nction with a l	ouilding permit? Ye	s No	Cnec Creative	k Approp	Trace Box)	
			Utility Auto	orization r	٧٠٠		
Existing Service						Meters	
New Service	_ Amps _	/Volts Over	rhead Und	lgrd	No. of I	Meters	
Number of Feeders an	d Ampacity						
Location and Nature o	f Proposed El	ectrical Work:					
						d Y A. William	
				table may b	e watved by	the Inspector of Wires. Total	
No. of Recessed Lumi	inaires	No. of CeilSusp. (Pad	idle) Fans	Transfor	mers		
No. of Luminaire Ou	tlets	No. of Hot Tubs		Generators KVA			
No. of Luminaires		Swimming Pool Abov	Swimming Pool Above Ingrnd.		No. of Emergency Lighting Battery Units		
No. of Receptacle Outlets		No. of Oil Burners	No. of Oil Burners		FIRE ALARMS No. of Zones No. of Detection and		
No. of Switches		No. of Gas Burners			Initiating Devices		
No. of Ranges		No. of Air Cond.			No. of Alerting Devices		
No. of Waste Disposers		Heat Pump Number Totals:	Heat Pump Number Tons KW		No. of Self-Contained Detection/Alerting Devices		
No. of Dishwashers			Space/Area Heating KW		Local Municipal Other Security Systems:*		
No. of Dryers		Heating Appliances	KW	No. o	f Devices (or Equivalent	
No. of Water Heaters	KW	No. of Signs	No. of Ballasts	Data Wi No. o	ring: f Devices (or Equivalent ns Wiring:	
No. Hydromassage B	athtubs	No. of Motors	Total HP	Telecom No. o	municatio f Devices	ns Wiring: or Equivalent	
OTHER:							
			h additional detail if c	desired, or a	s required b	y the Inspector of Wires.	
Estimated Value of Ele	ectrical Work:	(Wher spections to be requested in	n required by munic	npai policy	•) Oanduno	n completion	
Work to Start:	In:	spections to be requested in ss waived by the owner, no	narmit for the perfe	rmance of	electrical v	work may issue unless	
	C - C liability	e incurance including "com	nleted oneration" co	overage or	นร รับบริเลน	nai equivalent. The	
the licensee provides p	roor or mading	age is in force, and has exhi	bited proof of same	to the perr	nit issuing	office.	
THE PARTY OF THE AMERICAN	DANIOD T		(Specify)				
I certify, under the pa	ins and penalt	ies of perjury, that the info	rmation on this ap	plication is	true and o	complete.	
FIRM NAME:					LIC	. NO.:	
Licensee: Signature (If applicable, enter "exempt" in the license number line.)			·	LIC. NO.:			
4 T T			·		All, 101, 130		
	57-61, security	y work requires Department	t of Public Safety "	S" License:	Lic.	No.	
	******* *** T T T T T T T	R: I am aware that the Lice low, I hereby waive this rec	ancee dage not nave	rne naomi	v insuranc	er owner's agent.	
owner/Agent	th statuarate ne				ERMIT I	FEE: \$	
Signature		Telephone	No				

Town of Uxbridge

Electrical Fee's

RESIDENTIAL	
Minimum Fee	\$50.00
Fire & Security Systems	\$50.00
New Homes with Overhead Service New Homes with Underground Service	\$150.00 \$200.00
Additions: Basements, garage	\$100.00
Temp. Service up to 200 Amps.	\$75.00
Service Upgrade to 200 amps. (1 meter)	\$100.00
Hot Tub Swimming Pools - Above ground Swimming Pools - Inground	\$75.00 \$100.00 \$150.00
Re-Inspection	\$50.00
Photovoltaic Systems (Solar Systems) per kilowatt	\$50.00
COMMERCIAL	
Commercial Minimum & Contract cost of 3% for Electrical Fee, whichever is greater	\$100.00
Photovoltaic Systems (Solar Systems) per kilowatt - Systems over 50kW	\$14.00
Special off hour inspections by request of contractor	\$250.00