

STATE OF RHODE ISLAND  
**ELECTRICAL PERMIT APPLICATION**

MUNICIPALITY SMITHFIELD ISSUED \_\_\_\_\_ NUMERICAL CODE \_\_\_\_\_ PERMIT NO. \_\_\_\_\_  
 APPLICATION DATE \_\_\_\_\_ CENSUS TRACT \_\_\_\_\_ FEE RECEIVED: \$ \_\_\_\_\_ BY \_\_\_\_\_

1. STREET LOCATION \_\_\_\_\_ POLE NO. or UNDERGROUND NO. \_\_\_\_\_  
 2. PLAT/ MAP \_\_\_\_\_ 3. LOT/ BLOCK \_\_\_\_\_ 4. FILE/ PARCEL \_\_\_\_\_ 5. FLOOR LOCATION \_\_\_\_\_  
 6. USE OF STRUCTURE PREVIOUS \_\_\_\_\_ PROPOSED \_\_\_\_\_  
 7. \_\_\_\_\_ Temporary \_\_\_\_\_ New Installation \_\_\_\_\_ Change of Service \_\_\_\_\_ Starting Date \_\_\_\_\_  
 8. OWNER \_\_\_\_\_ ADDRESS \_\_\_\_\_ TEL. NO. \_\_\_\_\_  
 9. ELECTRICAL CONTRACTOR \_\_\_\_\_ ADDRESS \_\_\_\_\_ TEL. NO. \_\_\_\_\_  
 10. ARCH. OR ENG. \_\_\_\_\_ ADDRESS \_\_\_\_\_ TEL. NO. \_\_\_\_\_  
 11. STAMPED PRINTS YES NO 12. RHODE ISLAND REG. NO. \_\_\_\_\_ 13. CONTRACTOR'S LIC. NO. \_\_\_\_\_  
 14. DESCRIPTION OF WORK TO BE PERFORMED \_\_\_\_\_

15. Service entrance voltage \_\_\_\_\_ Amperage \_\_\_\_\_ Phase \_\_\_\_\_ No. of Meters \_\_\_\_\_  
 16. Wire size (cu. or al.) \_\_\_\_\_ Conductor Per Phase \_\_\_\_\_  
 17. Estimated Load: Electrical Heat \_\_\_\_\_ k.w. Lights \_\_\_\_\_ k.w. Range \_\_\_\_\_ Dryer \_\_\_\_\_ Motors, H.P., Phase \_\_\_\_\_  
 18. ESTIMATED COST OF COMPLETED INSTALLATION: \$ \_\_\_\_\_

MUNICIPAL ELECTRICAL PERMIT FEE: = \$ \_\_\_\_\_  
 CE & ADA FEE : \_\_\_\_\_ x .001 = \$ \_\_\_\_\_  
 ESTIMATED COST x .001 = \$ \_\_\_\_\_  
 (1 & 2 FAMILY DWELLINGS LIMITED TO CE & ADA FEE OF \$50.00) TOTAL PERMIT FEE = \$ \_\_\_\_\_

I hereby certify that I have the authority to make the foregoing application, that the application is correct, and that the owner of this building and the undersigned agree to conform to all application codes and ordinances of the municipality

ELECTRICAL CONTRACTOR'S SIGNATURE \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE ELECTRICAL WIRING PERMIT**

Inspections	Date	
Temporary Service _____	_____	
Roughing In _____	_____	PERMIT GRANTED:
Service & Meter _____	_____	DATE _____
Off Peak Meter _____	_____	
Final Approval _____	_____	
Disapproved* _____	_____	BY _____
		ELECTRICAL INSPECTOR

**CERTIFICATE OF INSPECTION**      DATE \_\_\_\_\_

To the Electric Utility Company: The installation described above has been inspected and approval is granted for connection to your service.

\_\_\_\_\_  
ELECTRICAL INSPECTOR