

HOLLIS BUILDING DEPARTMENT

7 Monument Square, Hollis, NH 03049 (603) 465-2209 x501

ELECTRICAL PERMIT

PERMIT # _____

Job Location: _____

Issued: _____

Map: _____ Lot: _____

Eversource WO# _____

Applicant/Owner: _____ NH License #: _____

Address: _____ Email: _____

Town: _____ State: _____ Zip: _____ Phone: _____

Property Owner: _____ Address: _____
Town: _____ State: _____ Zip: _____ Phone: _____

Project: _____
New: _____ Alteration _____ Repair _____ Addition _____ Other _____

| Item | Quantity | Load | Feeder Type | Fee |
|------------------|----------|------|-------------|-----|
| Ceiling Outlets | | | | |
| Switches | | | | |
| Plug Receptacles | | | | |
| Total Outlets | | | | |
| Ranges | | | | |
| Dryers | | | | |
| Washers | | | | |
| Water Heater | | | | |
| Dish Washer | | | | |
| Oven Units | | | | |
| Other Circuits | | | | |
| Total Circuits | | | | |
| Motors | | | | |
| Pumps | | | | |
| Generators | | | | |
| A/C Units | | | | |
| Electric Heat | | | | |
| Panel Size | | | | |
| Sub Panel Size | | | | |
| Application Fee | | | | |
| Total Fee | | | | |

Applicant certifies that ALL information given is correct and that ALL pertinent State and Town ordinances/codes will be complied with in performing the work for which this permit is issued.

**ALL INSPECTIONS CONDUCTED BY THE HOLLIS BUILDING DEPARTMENT (603) 465-2209 X 501
24 HOUR PRIOR NOTIFICATION REQUIRED ON ALL INSPECTIONS**

Signature of Applicant

Code Official

**APPLICANT MUST SIGN AND RETURN ORIGINAL FORM TO BUILDING DEPARTMENT
PRIOR TO CALLING FOR INSPECTION - FAXES WILL NOT BE ACCEPTED**