REQUEST FOR ELECTRICAL INSPECTION

Date:			Wed. Inspection		
			Fri. lı	nspection	
Owner's Name:					
Owner's Address:					
Homeowner's Phone:					
Jobsite Address:					
Contractor's Name:					
License # CE					
License # ME _					
Contractor's Phone: _			-		
Power Company: KU	Salt River Electric				
Other (list name of Po	wer Company):				
Type of Inspection:					
Residential:					
temporary pole		rough-in		re	
service only (3	0 days)	final	servi	ce upgrade	
Barn	Garage	Mok	oile Home		
Commercial	Industrial				

If this is a new mobile home, a C1 sticker must be at location.

If this is a used mobile home, a B1 and C1 sticker must be at location.

If homeowner is completing work, a landowner's waiver form must be filled out also.

MUST HAVE SEWER PERMIT IN HAND BEFORE INSPECTION OF NEW HOMES.

PAYMENT DUE UPON INSPECTION.