



OFFICE OF  
**BUILDING DEPARTMENT**  
**ORLEANS, MASS.**

---

**REQUEST FOR ELECTRICAL INSPECTION**

DATE: \_\_\_\_\_

DATE OF INSPECTION REQUESTED: \_\_\_\_\_

OWNER: \_\_\_\_\_

JOB LOCATION: \_\_\_\_\_

ELECTRICIAN & PHONE#: \_\_\_\_\_

PERMIT # AND DATE OF ISSUANCE: \_\_\_\_\_

**TYPE OF INSPECTION:**

\_\_\_ TRENCH (Time trench will be open) \_\_\_\_\_

\_\_\_ SERVICE

\_\_\_ ROUGH WIRE

\_\_\_ FINAL

\_\_\_ OTHER \_\_\_\_\_

\_\_\_ SOMEONE WILL BE PRESENT \_\_\_ NO ONE HOME, OK TO ENTER

\_\_\_ SPECIAL INSTRUCTIONS: \_\_\_\_\_

**\* FAILURE TO COMPLETE FORM MAY RESULT IN A DELAYED INSPECTION!!!**

**\*\* THIS REQUEST IS NOT CONSIDERED RECEIVED UNTIL IT IS DATE STAMPED AND PRESENTED TO THE ELECTRICAL INSPECTOR AT HIS NEXT SCHEDULED OFFICE HOUR. FAX#: 508-240-3745**

**24 HOUR WRITTEN NOTICE IS REQUIRED TO CANCEL A SCHEDULED INSPECTION! JOBS THAT ARE NOT COMPLETE OR OTHERWISE NOT READY FOR INSPECTION OR WHERE THERE IS INSUFFICIENT ACCESS TO THE JOB SITE TO CONDUCT AN INSPECTION WILL BE CHARGED A REINSPECTION FEE!!!**