



COMMONWEALTH OF MASSACHUSETTS

TOWN OF NORTON
ELECTRICAL INSPECTOR
70 East Main Street
Norton, MA 02766

tel. (508)285-0290
fax (508)285-0295

REQUEST FOR ELECTRICAL INSPECTION

I, _____ hereby request an inspection on _____, ^{Date}
under Section 12.00 of the Massachusetts Electrical Code, 527 CMR for a :

____ Rough inspection ____ Final inspection
____ Service inspection, **SRE#** _____ ____ Pool bond

____ Other:

Explain inspection: _____

Permit # _____

Address of inspection: _____

Owner of Premises: _____

Signature of Electrician _____

License # _____ Telephone # _____

- **IF PREMISES ARE NOT ACCESSIBLE OR INSPECTION FAILS, A \$35.00 RE-INSPECTION FEE WILL BE CHARGED AND MUST BE PAID BEFORE RE-INSPECTION IS PERFORMED.**

Date inspected: _____ Inspected by: _____

Pass _____ Fail _____ /Reason _____