



# NYS Electrical Inspections

278 Indian Head RD  
Kings Park, NY 11754

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www.nyselectricalinspections.com

Date: \_\_\_\_\_ Contractor:  Home Owner:

Name: \_\_\_\_\_ Village: \_\_\_\_\_ Cross St: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Town: \_\_\_\_\_ State: NY \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Contact Phone # \_\_\_\_\_ Building Name: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Permit #: \_\_\_\_\_ Section #: \_\_\_\_\_ Block #: \_\_\_\_\_ Lot #: \_\_\_\_\_

Company Name: \_\_\_\_\_ License #: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Town: \_\_\_\_\_ State: NY \_\_\_\_\_ E-Mail: \_\_\_\_\_

Contractor Phone #: \_\_\_\_\_

### TYPE OF WORK PERFORMED

New:  Residential:  Commercial:  Additional:

Existing:  Renovation:

### AREA

Basement:  First Floor:  Second Floor:  Attic:

Indoor:  Outdoor:  Survey:  Pool:

Hot Tub:  Detached garage:  Shed:  Other:

### SERVICE

New:  Upgrade:  Number of meters:  Phase:

Over Head:  Under Ground:  Amperage: \_\_\_\_\_ Voltage: \_\_\_\_\_

Email Temp to us:  Relocate POA:  Send Temp to utility:  METER #: \_\_\_\_\_

### INSTALLATION TYPE

Switches #: <input type="checkbox"/>	Receptacles #: <input type="checkbox"/>	Light Fixtures: <input type="checkbox"/>	Smoke Dect: <input type="checkbox"/>
Recep Arc Fault <input type="checkbox"/>	Receptacles GFCI <input type="checkbox"/>	GFCI Indoor <input type="checkbox"/>	GFCI Outdoor <input type="checkbox"/>
Disconnects: <input type="checkbox"/>	GFCI: <input type="checkbox"/>	Hi Hats: <input type="checkbox"/>	CO Detector: <input type="checkbox"/>
Washer: <input type="checkbox"/>	Dryer: <input type="checkbox"/>	Fans & size: <input type="checkbox"/>	Dishwasher: <input type="checkbox"/>
Range & size <input type="checkbox"/>	Oven & size: <input type="checkbox"/>	EL Heater Size: <input type="checkbox"/>	Boiler Oil: <input type="checkbox"/>
Hot Air <input type="checkbox"/>	Boiler Gas <input type="checkbox"/>	Air handler: <input type="checkbox"/>	Condenser: <input type="checkbox"/>
15 amp circuits <input type="checkbox"/>	20 amp circuits <input type="checkbox"/>	30 amp circuits <input type="checkbox"/>	Sub Panel <input type="checkbox"/>
15 amp Arc fault <input type="checkbox"/>	20 amp Arc Fault <input type="checkbox"/>	30 amp Arc Fault <input type="checkbox"/>	Panel size <input type="checkbox"/>
15 amp GFCI CB <input type="checkbox"/>	20 amp GFCI CB <input type="checkbox"/>	30 amp GFCI CB <input type="checkbox"/>	NEMA <input type="checkbox"/>

### Generator

KW:  Transfer Switch:  Phase:  Voltage: \_\_\_\_\_

### Pool & Hot Tub

Pump size  Heat Size  Pool Panel size  Pool Lights

Time Clock  Water Bond  Salt generator

Other Equipment: \_\_\_\_\_

Other Notes: \_\_\_\_\_

Inspection request: \_\_\_\_\_ Rough Inspection: / / Final Inspection: / /