

**ELECTRICAL INSPECTION
RELEASE FORM**

FD 6773

SERVICE ADDRESS

224 N. Perry
OWNER/BUILDER/ELECTRICIAN

Mrs Leonard P. Perry
SERVICE ADDRESS

OWNER/BUILDER/ELECTRICIAN

SERVICE ADDRESS

OWNER/BUILDER/ELECTRICIAN

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OWNER/BUILDER/ELECTRICIAN

SERVICE ADDRESS

OWNER/BUILDER/ELECTRICIAN

Napoleon Power

FROM (City/County)		DATE ISSUED	
LOT NO.	CITY/VILLAGE/TWP CODE	AMPS	
Res. <input type="checkbox"/> Temp. <input type="checkbox"/> OH <input checked="" type="checkbox"/> 10	NO. MTRS	100	<input type="checkbox"/> NEW
Com. <input checked="" type="checkbox"/> Perm. <input checked="" type="checkbox"/> UG <input type="checkbox"/> 30		1	<input type="checkbox"/> REL
			<input checked="" type="checkbox"/> UPG
LOT NO.	CITY/VILLAGE/TWP CODE	AMPS	
Res. <input type="checkbox"/> Temp. <input type="checkbox"/> OH <input type="checkbox"/> 10	NO. MTRS		<input type="checkbox"/> NEW
Com. <input type="checkbox"/> Perm. <input type="checkbox"/> UG <input type="checkbox"/> 30			<input type="checkbox"/> REL
			<input type="checkbox"/> UPG
LOT NO.	CITY/VILLAGE/TWP CODE	AMPS	
Res. <input type="checkbox"/> Temp. <input type="checkbox"/> OH <input type="checkbox"/> 10	NO. MTRS		<input type="checkbox"/> NEW
Com. <input type="checkbox"/> Perm. <input type="checkbox"/> UG <input type="checkbox"/> 30			<input type="checkbox"/> REL
			<input type="checkbox"/> UPG
LOT NO.	CITY/VILLAGE/TWP CODE	AMPS	
Res. <input type="checkbox"/> Temp. <input type="checkbox"/> OH <input type="checkbox"/> 10	NO. MTRS		<input type="checkbox"/> NEW
Com. <input type="checkbox"/> Perm. <input type="checkbox"/> UG <input type="checkbox"/> 30			<input type="checkbox"/> REL
			<input type="checkbox"/> UPG
LOT NO.	CITY/VILLAGE/TWP CODE	AMPS	
Res. <input type="checkbox"/> Temp. <input type="checkbox"/> OH <input type="checkbox"/> 10	NO. MTRS		<input type="checkbox"/> NEW
Com. <input type="checkbox"/> Perm. <input type="checkbox"/> UG <input type="checkbox"/> 30			<input type="checkbox"/> REL
			<input type="checkbox"/> UPG
LOT NO.	CITY/VILLAGE/TWP CODE	AMPS	
Res. <input type="checkbox"/> Temp. <input type="checkbox"/> OH <input type="checkbox"/> 10	NO. MTRS		<input type="checkbox"/> NEW
Com. <input type="checkbox"/> Perm. <input type="checkbox"/> UG <input type="checkbox"/> 30			<input type="checkbox"/> REL
			<input type="checkbox"/> UPG
LOT NO.	CITY/VILLAGE/TWP CODE	AMPS	
Res. <input type="checkbox"/> Temp. <input type="checkbox"/> OH <input type="checkbox"/> 10	NO. MTRS		<input type="checkbox"/> NEW
Com. <input type="checkbox"/> Perm. <input type="checkbox"/> UG <input type="checkbox"/> 30			<input type="checkbox"/> REL
			<input type="checkbox"/> UPG