

ELECTRICAL INSPECTION
RELEASE FORM

ED 6773

SERVICE ADDRESS
1515 N. Scott ST.
OWNER/BUILDER/ELECTRICIAN,
FOSTER COMPANY

SERVICE ADDRESS

OWNER/BUILDER/ELECTRICIAN

SERVICE ADDRESS

OWNER/BUILDER/ELECTRICIAN

SERVICE ADDRESS

OWNER/BUILDER/ELECTRICIAN

SERVICE ADDRESS

OWNER/BUILDER/ELECTRICIAN

NAP

FROM (City/County)	DATE ISSUED			
WOOD NAP	3-1-97			
LOT NO. CITY/VILLAGE/TWP	CODE	AMPS	NO. MTRS	NEW REL UPG
Res. <input type="checkbox"/> Temp. <input type="checkbox"/> OH <input checked="" type="checkbox"/>	10			
Com. <input checked="" type="checkbox"/> Perm. <input type="checkbox"/> UG <input type="checkbox"/> 30				
LOT NO. CITY/VILLAGE/TWP	CODE	AMPS	NO. MTRS	NEW REL UPG
Res. <input type="checkbox"/> Temp. <input type="checkbox"/> OH <input type="checkbox"/> 10				
Com. <input type="checkbox"/> Perm. <input type="checkbox"/> UG <input type="checkbox"/> 30				
LOT NO. CITY/VILLAGE/TWP	CODE	AMPS	NO. MTRS	NEW REL UPG
Res. <input type="checkbox"/> Temp. <input type="checkbox"/> OH <input type="checkbox"/> 10				
Com. <input type="checkbox"/> Perm. <input type="checkbox"/> UG <input type="checkbox"/> 30				
LOT NO. CITY/VILLAGE/TWP	CODE	AMPS	NO. MTRS	NEW REL UPG
Res. <input type="checkbox"/> Temp. <input type="checkbox"/> OH <input type="checkbox"/> 10				
Com. <input type="checkbox"/> Perm. <input type="checkbox"/> UG <input type="checkbox"/> 30				
LOT NO. CITY/VILLAGE/TWP	CODE	AMPS	NO. MTRS	NEW REL UPG
Res. <input type="checkbox"/> Temp. <input type="checkbox"/> OH <input type="checkbox"/> 10				
Com. <input type="checkbox"/> Perm. <input type="checkbox"/> UG <input type="checkbox"/> 30				
LOT NO. CITY/VILLAGE/TWP	CODE	AMPS	NO. MTRS	NEW REL UPG
Res. <input type="checkbox"/> Temp. <input type="checkbox"/> OH <input type="checkbox"/> 10				
Com. <input type="checkbox"/> Perm. <input type="checkbox"/> UG <input type="checkbox"/> 30				