



## Town of Livermore Falls

### Electrical Connection Notification Permit Application

Date: \_\_\_\_\_ Name of Applicant: \_\_\_\_\_

Applicants Phone #: \_\_\_\_\_ Business Name: \_\_\_\_\_

Applicants Address: \_\_\_\_\_

Property Location: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone #: \_\_\_\_\_

Owners Address: \_\_\_\_\_

Tax Map: \_\_\_\_\_ Lot #: \_\_\_\_\_ Commercial: \_\_\_\_\_ Residential: \_\_\_\_\_ Shoreland Zone: \_\_\_\_\_

Electrician: \_\_\_\_\_ License #: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

#### **Service Information**

Number of Meters: \_\_\_\_\_ Location of Service: Overhead: ☐ Underground: ☐

Type of Service: New ☐ Replacement ☐ Temporary ☐ Size of Service: \_\_\_\_\_ Amps

Utility Company Work Order #, Account #, or Meter #: \_\_\_\_\_

Brief Description of Work to be Done: \_\_\_\_\_

***I agree to perform all work in accordance with the National Electrical Code and all applicable local, state, and federal laws.***

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

#### **FOR CODE ENFORCEMENT USE**

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Building Permit #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

CEO: \_\_\_\_\_ Date: \_\_\_\_\_

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