

BETTER HOMES

ELECTRICAL INSPECTION SERVICES INC.



5 Buckout Road
 West Harrison, NY 10604
 Phone: 914-906-0443
 Email: betterhomes252@gmail.com

NAME:	DATE:	ELECT. PERMIT NO.		
CITY/VILLAGE	ZIPCODE	BLDG PERMIT NO.		
ADDRESS:		BUILDING DEPT		
PHONE #	SECTION	BLOCK	LOT	UTILITY
EMAIL ADDRESS:		<input type="checkbox"/> Residential <input type="checkbox"/> Commercial		
OWNER'S NAME AND ADDRESS				
WORK LOCATION: _____ <input type="checkbox"/> Outside <input type="checkbox"/> Basement <input type="checkbox"/> Garage <input type="checkbox"/> Attic <input type="checkbox"/> Porch _____ Floor: <input type="checkbox"/> 1st floor <input type="checkbox"/> 2nd floor <input type="checkbox"/> 3rd floor <input type="checkbox"/> 4th floor <input type="checkbox"/> Other floor _____ <input type="checkbox"/> Reinspection <input type="checkbox"/> Renovation <input type="checkbox"/> Generator <input type="checkbox"/> New home <input type="checkbox"/> Other _____				
Comments:				
SERVICE AMPS CON EDISON	CASE NO.	SERVICE ENTERS BUILDING: <input type="checkbox"/> Overhead <input type="checkbox"/> Underground		
COMPANY NAME:	DATE OF APPLICATION:	LICENSE# WHEN APPLICABLE:		
STREET ADDRESS:	CITY:	STATE:	ZIPCODE:	
TELEPHONE:	CELL PHONE:	EMAIL:		
SIGNATURE OF APPLICANT: X				

The application is intended to cover the above listed items to be inspected. If at any time of inspection additional items have been installed, we are authorized to make the inspection and adjust the fee for the additional items inspected as provided by the applicant. The applicant declares that there are no open applications for the above with any other inspection company. Application only good one year after filing date.