



The Commonwealth of Massachusetts
State Board of Building Regulations and Standards
Massachusetts State Building Code
780 CMR



TOWN OF NAHANT
BUILDING DEPARTMENT, TOWN HALL
335 Nahant Road, NAHANT, MA 01908

Application Number:	Date Issued:	Permit Number:	FEE: \$	Check No. :	Date Paid :
E-14-3210	4/4/2014	E-14-0093	166	944	4/4/2014

APPLICATION FOR PERMIT TO PERFORM ELECTRICAL WORK

All work to be performed in accordance with the Massachusetts Electrical Code (MEC).527 CMR 12.00

City or Town of: <u>Nahant</u> To the Inspector of Wires:					
By this application the undersigned gives notice of his or her intention to perform the electrical work described below.					
Location (Street & Number) <u>11 CENTRAL ST</u>					
Owner or Tenant		<u>MORSE, PAUL F &</u>		Telephone No. <u>7815992554</u>	
Owner's Address		<u>11 CENTRAL ST</u>			
Is this permit in conjunction with a building permit? Yes <input type="radio"/> No <input type="radio"/> (Select Appropriate Button)					
Purpose of Building		Utility Authorization No.			
<u>single family home</u>					
Existing Service		No. of Meters			
<u>200 Amps 120/240 Volts Overhead</u>		<input type="radio"/> Undgrd <input type="radio"/>			
New Service		No. of Meters			
<u>Amps Volts Overhead</u>		<input type="radio"/> Undgrd <input type="radio"/>			
Number of Feeders and Ampacity					
Location and Nature of Proposed Electrical Work: <u>installation of roof mounted photovoltaic solar system</u>					
<i>Completion of the following table may be waived by the Inspector of Wires.</i>					
No. of Recessed Fixtures		No. of Ceil.-Susp. (Paddle) Fans			No. of Transformers Total KVA
No. of Lighting Outlets		No. of Hot Tubs			Generators KVA
No. of Lighting Fixtures		Swimming Pool Above grnd. <input type="radio"/> In-grnd. <input type="radio"/>			No. of Emergency Lighting Battery Units
No. of Receptacle Outlets		No. of Oil Burners			FIRE ALARMS
No. of Switches		No. of Gas Burners			No. of Zones
No. of Ranges		No. of Air Cond		Total Tons	No. of Detection and Initiating Devices
No. of Waste Disposers		Heat Pump Totals:	Number	Tons	KW
No. of Dishwashers		Space/Area Heating KW			No. of Alerting Devices
No. of Dryers		Heating Appliances			KW
No. of Water Heaters	KW	No. of Signs		No. of Ballasts	No. of Self-Contained Detection/Alerting Devices
No. Hydromassage Bathtubs		No. of Motors		Total HP	Local: <input type="radio"/> Municipal Connection <input type="radio"/> Other
Data Wiring: No. of Devices or its Equivalent					
Telecommunications Wiring: No. of Devices or its Equivalent					
OTHER:					
<i>Attach additional detail if desired , or as required by the Inspector of Wires.</i>					
Insurance Coverage: Unless waived by the owner, no permit for the performance of electrical work may issue unless the license provides proof of liability insurance including; "completed operation" coverage or its substantial equivalent. The undersigned or its equivalent certifies that such coverage is in force, and has exhibited proof of same to the permit issuing office.					
CHECK ONE: INSURANCE <input type="radio"/> BOND <input type="radio"/> OTHER <input type="radio"/> (Specify:)					(Expiration Date)
Estimated Value of Electrical Work:			<u>15600.00 (When required by municipal policy.)</u>		
Work to Start: <u>4/25/2014</u> Inspections to be requested in accordance with MEC Rule 10, and upon completion.					

I certify, under the pains and penalties of perjury, that the information on this application is true and complete.

FIRM NAME: <i>vivint solar developer llc</i>		LIC. NO. :	<i>13141A</i>
License: <i>Phillip Zampitella</i>	Signature: _____	LIC. NO. :	<i>13141A</i>
<i>(If applicable , enter "exempt" in the license number line.)</i>		Bus. Tel. No. :	<i>7813053065</i>
Address: <i>24 normac rd woburn ma 01801</i>		Alt. Tel. No. :	
OWNER'S INSURANCE WAIVER: I am aware that the Licensee <i>does not have</i> the liability insurance coverage normally required by law . By my signature below , I hereby waive this requirement. I am the (check one) <input type="radio"/> owner <input type="radio"/> owner's agent.			
Owner/Agent Signature: _____		Applicant Name: <i>vivint solar</i>	Telephone No. <i>7813053065</i>