



Office Use		Elect. Permit #						Date	
		Bldg Permit #						Sq Ft	
		Plumbing Permit #							
		Final Certificate #							
City / Village		Zip		Building Dept.			County		
Address		Cross Street			Section		Block	Lot	
Owner Name / Address (If different than above)						Contact Number			
Basement	1st Fl.	2nd Fl.	3rd Fl.	More Than 3 Fl.	Garage	Attic	Outside	Residential	Commercial
Receptacles	Special Recept Amt Amps	GFCI	AFCI	Switches	Dimmers	Smoke Alarms	C / O Detector	Hood	Trash Compact
Range (s)	Cooktop (s)	Oven (s)	Dishwashers	Refrigerator	Disposal	Microwave	Luminaires	Generator	Transfer Switch
SERVICE									
Amperage	#Panels	1P	3P	# Meters	# Disconnect	Underground Overhead	New Upgrade	Reconnect Disconnect	Repair
Utility ID#		Con Ed		NYSEG		Central Hudson		Orange / Rockland	
PHOTOVOLTAIC SYSTEM									
PV Modules	Inverters	AC Disconnect	Junction Box	Combiner Box	Load Center	PV Monitor	Energy Storage System	DC Disconnect	
Legalization			Safety Inspection				Consultation		
Scope of Work									
SWIS									
This application is valid for one (1) year from the date received by SWIS. This application is intended to cover the above listed items to be inspected, if at any time of inspection additional items have been installed, you are authorized to make the inspection and adjust the fee for the additional items inspected. The applicant declares that there is no open applications for the above address with any other inspection company. The applicant, owner or authorized agent agrees to all the above terms and conditions as set forth for the application.									
Email Address						Name			
License #			Date			Signature			
Address			City / State				Zip Code		
Company						Phone #			