

BUILDING INSPECTIONS DEPARTMENT PO BOX 950, 209 SEMINARY ST. KENANSVILLE, NC 28349

PHONE: (910) 296-2124 FAX: (910) 296-2166 EMAIL: INSPECTIONS@DUPLINCOUNTYNC.COM

## INSPECTION REQUEST FOR ELECTRICAL RECONNECTION

PROPERTY OWNER'S NAME:	OWNER'S PHONE NUMBER:				
911 ADDRESS OF PROPERTY:					
APPLICANT'S' NAME:	APPLIANT'S PHONE NUMBER:				
POWER COMPANY:	ODUKE	OFOUR COUNTY	OTRI COUNTY	OJOEMC	
INTENDED USE OF THIS PROPERTY:					
HOW LONG HAS THE ELECTRICAL SERVICE				*******	*********
BY MAKING THE REQUEST THE APPLICATION OF THE ENTIRE STRUCTUS STRUCTURE IN TERMS OF STRUCTUR CHARACTERISTICS OF THIS STRUCTUR THE OCCUPANTS OF SAID STRUCTUR	JRE AND THAT 1 AL, ELECTRICA RE MAY REQUIF E.	THEY FULLY UNDERSTAN L, MECHANICAL, GAS PIF RE ADDITIONAL MAY REP	D THAT ANY SIGN PING, PLUMBING, A PAIR WORK TO AS	OF DAMAGE, DETERIO AND ANY OTHER RELE SURE THERE ARE NO I	ORATION OF THE EVANT TECHNICAL IMMINENT DANGERS TO
I HAVE READ AND UNDERSTAND			***********	********	*************************
APPLICANT'S' SIGNATURE:				DATE:	