TOWN OF MERTON CERTIFICATE OF ELECTRIC INSPECTION

CUSTOMER'S NAME _____

STREET ADDRESS _____ WAUKESHA COUNTY

ELECTRIC CONTRACTOR _____ **PHONE** _____

TYPE OF SERVICE	☐ CERT.#_____	☐ **NEW SERVICE**	☐ **REWIRE**
☐ RESIDENCE	☐ (TEMP) SERVICE	☐ SINGLE PHASE	_____ AMPS
☐ FARM	☐ CENTER YD POLE	☐ 3-PHASE	
☐ COMMERCIAL	☐ PERMANENT	☐ UNDERGROUND	☐ OVERHEAD
☐ SWING TO PERM.	☐ OTHER		

THIS IS TO CERTIFY THAT I HAVE EXAMINED THE ELECTRICAL ENTRANCE EQUIPMENT (METER SOCKET, SWITCH BOX, GROUND) INSTALLED BY THE ABOVE AND IT IS IN COMPLIANCE WITH THE STATUTES, ORDINANCES AND ALL RULES AND REGULATIONS PRESCRIBED BY THE WISCONSIN STATE ELECTRIC CODE.

ELECTRICAL INSPECTOR SIGNATURE X _____ **DATE** _____/_____/_____