

**INSPECTION FORM**  
**CERTIFIED ELECTRICAL INSPECTIONS INC.**  
**188A PARK AVENUE AMITYVILLE, NEW YORK 11701**  
**631-598-5610 631-598-0541(FAX)**

APPLICANT	OWNER/TENANT LAST NAME	<input type="checkbox"/> Applicant the same as the Owner/Tenant.
COMPANY NAME	OWNER/TENANT FIRST NAME	<input type="checkbox"/> New Structure <input type="checkbox"/> Reno/Addition
STREET	STREET	NEAREST INTERSECTION
CITY	CITY	SECTION BLOCK LOT
ZIP CODE	ZIP CODE	BUILDING PERMIT #
STATE	STATE	APPLICATION #
COMPANY PHONE#	HOME PHONE#	CERTIFICATE#
CELL PHONE	CELL PHONE#	Requested Date /Time for Survey Inspection / /07 : PM/AM
COMPANY FAX#	WORK PHONE #	Requested Date/Time for Final Inspection / /07 : PM/AM

<b>Inspect</b>	Bath	Bed	Family	Dining	Kitchen	Laundry	Office	Porch	Living	Hall
<b>Basement</b>										
<b>1<sup>st</sup> Floor</b>										
<b>2<sup>nd</sup> Floor</b>										
<b>3<sup>rd</sup> Floor</b>										
<b>Garage</b>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	Attached <input type="checkbox"/>		Detached <input type="checkbox"/>		Converted <input type="checkbox"/>		# of Rooms	
<b>Pool</b>	Aboveground <input type="checkbox"/> In ground <input type="checkbox"/>				Hot Tub <input type="checkbox"/>		New <input type="checkbox"/>		Existing <input type="checkbox"/>	
<b>Other:</b>							Converted <input type="checkbox"/>		# of Rooms	
<b>Service</b>	Overhead <input type="checkbox"/>			Underground <input type="checkbox"/>			LIPA Owned <input type="checkbox"/>		Other:	
100A <input type="checkbox"/>	150A <input type="checkbox"/>	200A <input type="checkbox"/>	320A <input type="checkbox"/>	400A <input type="checkbox"/>	800A <input type="checkbox"/>	10 <input type="checkbox"/>	30 <input type="checkbox"/>	Other:		

<b>Inspection Type</b>	<b>Rough</b>	<b>Temp</b>	<b>Closed Wall</b>	<b>Final</b>	<b>Re-Inspection</b>
Residential					
Commercial					

<b>Estimated Total:</b>	TOB License#	TOH License#	Suffolk License#
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Notes: