

GOVERNMENT OF THE VIRGIN ISLANDS

DEPARTMENT OF PLANNING AND NATURAL RESOURCES
DIVISION OF BUILDING PERMITS

STT/STJ DISTRICT
TEL: (340) 774-3320
FAX: (340) 714-9532

STX DISTRICT
TEL: (340) 773-1082
FAX: (340) 778-4620

FINAL ELECTRICAL INSPECTION

DATE: _____

LEGAL INFORMATION

NAME OF OWNER: _____

LOCATION OF BUILDING: _____

USE OF BUILDING: RESIDENTIAL COMMERCIAL INDUSTRIAL OTHER

NUMBER OF APARTMENTS: _____

NAME OF CONTRACTOR: _____

NAME OF ELECTRICIAN: _____

V.I. LICENSE NO.: _____ ELECTRICAL PERMIT NO.: _____

DATE ISSUED: _____

GENERAL DESCRIPTION

TYPE OF FLOOR: _____ WALLS: _____ ROOF: _____

ESTIMATED CURRENT: _____ AMPS VOLTAGE: _____

SERVICE ENTRANCE

SIZE: _____ TYPE: _____ SINGLE PHASE THREE PHASE

NO. OF DISTRIBUTION PANELS: _____ NO. OF METERS: _____

CIRCUIT DISTRIBUTION

NO. OF 120v CIRCUITS: _____ NO. OF 240v CIRCUITS: _____

NO. OF 208v CIRCUITS: _____ TOTAL NO. OF CIRCUITS: _____

For Department Use Only

REMARKS

INSPECTED BY: _____ DATE: _____

ELECTRICAL INSPECTOR

OCCUPANCY NO.: _____ DATE ISSUED: _____

APPROVED BY: _____ DATE: _____

TERRITORIAL DIRECTOR

