

A Touchstone Energy* Cooperative

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> > a

WIRING AFFIDAVIT/CERTIFICATE OF ELECTRIC INSPECTION

This certificate is required for all electrical services that Pierce Penin Cooperative Services energizes

Member Name:	Owner of Premise:		
Service Address:			
City:	State:	Zip:	
County:	Township:		
Electrical Contractor:	Address:		
(Please print)			
I certify that this information is correct. I hereby return trip to the above location because of eithe violation as determined by the electrical inspecto their services.	r an error or omission on this certificat	e, or to disconnect this service due to a code	
	Owner's Signature		
•	worn on oath says the following wiri	·	
Residence (Temp.) Service	1-Phase service entrance	AMPSVOLTS	
Farm Center Yd. Pole	3-Phase service entrance	AMPSVOLTS	
Commercial Permanent	Rewire/Upgrade	AMPSVOLTS	
Swing to Perm. Overhead System Size: kW Wind F	Underground Photo Voltaic Digester	Other:	
Valid Contractor's License #	Licensed 1	Electrical Contractor Signature	
Master Electrician License #	 Master El	Master Electrician Signature	
On the premises described above and in doing said wiring Electrical Code(NEC), Wisconsin Administrative Code, a this form must be signed by the electrician/electrical inspe	nd the service rules of Pierce Pepin Cooperativ	ve Services. Prior to energizing the above service,	
Inspector Use Only		Office Use Only	
WI UDC Certified Inspector #:	PPCS Acct. #:		
Date Approved:	PPCS Location #:		
Electrical Inspector (please print):	Work Order Number:		
		ct Date:	
Electrical Inspector Signature:		Received:	
	D DDCC.		