Swimming Pool Installation Notification For Inspectors

Owner		Installer	
Name:		**Name:**	
Address:		**Address:**	
-			
Phone:	**Office:**	**Phone:**	**Office:**
	Cell:		**Cell:**
	Home:		**Fax:**

Site Location		Electrical Contractor	
Name:		**Name:**	
Address:		**Phone:**	**Office:**
			Cell:
			Fax:

Date Requested for Electrical Inspection: _____

NB Power –	**call for locate**	**1-800-663-6272**
Enbridge Gas –	**call for locate**	**1-800-994-7773**
Municipal Water / Sewage-		

Additional Information