



ISLAMORADA, VILLAGE OF ISLANDS

ELECTRICAL SAFETY INSPECTION AFFIDAVIT

Owner's Name:

Building/Structure Address:

Building/Structure Sq. Footage:

Building/Structure # of Stories:

Inspection Date:

Inspection Completed By (Licensed Engineer/Architect **OR** Licensed Electrical Contractor

Licensed Engineer/Architect Name: FL Lic. #:

Licensed Electrical Contractor Name: FL Lic. #:

1. **ELECTRICAL SERVICE**

- A. AMPS: Voltage (select): 1Ø 3Ø Overhead Underground
- B. Meter Can: Code Compliant Requires replacement
- C. Grounding: Code Compliant Requires repair
- D. Conductors: Code Compliant Requires repair

2. **ELECTRICAL PANEL / SERVICE DISCONNECT:**

- A. Panel Location: Inside Outside
- B. Condition: Code Compliant Requires repairs
- C. Service Disconnect Location: Inside Outside
- D. Condition: Code Compliant Requires repairs

3. **INTERIOR/EXTERIOR BUILDING ELECTRICAL**

- A. Sub-panel: Code Compliant Requires repairs
- B. Branch Circuits: Code Compliant Requires repairs
- C. Lighting / Receptacles: Code Compliant Requires repairs
- D. Washer: Code Compliant Requires repairs
- E. Dryer: Code Compliant Requires repairs
- F. Water Heater: Code Compliant Requires repairs
- G. Generator: Code Compliant Requires repairs N/A
- H. Boat lift: Code Compliant Requires repairs N/A

RESULT OF INSPECTION

NO REPAIRS REQUIRED, ELECTRICAL SYSTEM IS DEEMED SAFE FOR ELECTRICAL SERVICE CONNECTION
 REPAIRS ARE REQUIRED AS OUTLINED IN THE ATTACHED INSPECTION REPORT (PERMIT REQ.)

Authorized Signature: _____ Print: _____ Date: _____

Sworn and subscribed before me this _____ day of _____ 20____.

Personally Known Produced Identification – Type of ID Produced: _____

Signature of Notary Public: _____ SEAL: _____

RETURN COMPLETED FORM TO:

Islamorada, Village of Islands
Attn: Building Services
86800 Overseas HWY Islamorada, Florida 33036
email: evelyn.fraley@islamorada.fl.us