

Checklist for Electrical Inspections

This checklist can help you get prepared to submit an electrical inspection through PPL Electric Utilities' Contractor Services tool at ppllectric.com/contractorservices.
Fields with bold text and a red asterisk are required.

Note: This form is not a cut-in card. Please do not fax or mail this form to PPL Electric Utilities.

Work Order Number* <input type="checkbox"/> _____	Service Address* <input type="checkbox"/> _____ _____ _____ _____	Date of Inspection* <input type="checkbox"/> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">January</td> <td style="width: 33%;">May</td> <td style="width: 33%;">September</td> </tr> <tr> <td>February</td> <td>June</td> <td>October</td> </tr> <tr> <td>March</td> <td>July</td> <td>November</td> </tr> <tr> <td>April</td> <td>August</td> <td>December</td> </tr> </table> <p style="text-align: center;">Month Day</p>	January	May	September	February	June	October	March	July	November	April	August	December
January	May	September												
February	June	October												
March	July	November												
April	August	December												

Work Order Initiator <input type="checkbox"/> (contractor, electrician, etc.) Name _____	Electrical Contractor* <input type="checkbox"/> Name _____ Phone <input type="text"/> - <input type="text"/> - <input type="text"/> Ext. <input type="text"/>	Owner / Occupant <input type="checkbox"/> Name _____
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Inspection Information

Phase* Single Three	IEEE 1547 / UL 1741 Compliant? <input type="checkbox"/> Yes <input type="checkbox"/> No (applies to Distributed Generation only)
Voltage* 120 120/240 120/208 240/480 277/480 480 Other (please describe): _____	Status* <input type="checkbox"/> Passed <input type="checkbox"/> Violation (Please describe in notes below)
Amps 60 Amps 100 Amps 200 Amps 400 Amps 600 Amps	Associated Work Orders (usually applies to a meter stack) _____ _____ _____ _____ _____
Overhead/Underground OH UG	Notes: _____ _____ _____ _____
Meter Number _____	