



City of Revere

Brian M. Arrigo
Mayor

Matteo Fabiano
Electrical Inspector
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REQUEST TO TERMINATE ELECTRICAL PERMIT

I am the permit holder or property owner and hereby requests the Electrical Inspector to terminate the electrical permit/s # _____ for the property located at [street address] _____, Revere, MA 02151.

Reason/s for termination _____

Has electrical work started? Yes _____ NO _____

Please fill out either the Permit Holder OR Property Owner Section below:

Permit Holder- Name-PRINT

Property Owner-Name-PRINT

Street Address

Street Address

City/Town State Zip Code

City/Town State Zip Code

Email: _____

Email: _____

Phone: _____

Phone: _____

Signature

Signature

COMMONWEALTH OF MASSACHUSETTS

On this _____ day of _____, 20____ before me, the undersigned notary public, _____ personally appeared, proved to me through satisfactory evidence, which were _____, to be the person whose name is signed on this document, and acknowledged to me that he/she signed it voluntarily for its stated purpose.

Notary Public

My Commission Expires

527 CMR 12:00,1 Rule 8 in accordance w with M.G.L. c. 143 § 3L –Massachusetts Electrical Code 2020 Amendments