LEA COUNTY ELECTRIC COOPERATIVE, INC. STATEMENT OF FACT

CONTRACTOR CERTIFICATE

Owner/Business Name:		
Site	te Address:	
Pho	none Number:	
De:	escribe type of service:	
I fu star Elec und den com	urther certify and affirm all work has bee andards and utility guidelines, adopted by t ectric Code, the National Electric Safety C derstand and acknowledge that if the insta nied and or disconnected by the Coopera	by the State of New Mexico to perform electrical work in New Mexico. In performed and verified by me, to conform with all current codes, the State of New Mexico, the local jurisdictional authority, the National code and the Cooperative, whichever has authority and is stricter. It is determined to be noncompliant, the electric service may be tive, or upon notification, I will bring the installation into immediate in bility for the installation and its compliance with adopted codes and
	Print Name of Electrical Contracto	r
	Signature of Electrical Contractor	
	New Mexico License #	
	Contractor Phone #:	Date:
	CERT	IFICATION OF INSPECTION
certi pren New Coop	tification entity recognized by the Cooperat mise is in compliance with all applicable c w Mexico, the local jurisdictional authority,	qualified inspector by the International Code Council, or such other ive. I further affirm the installation performed at the above-described odes, safety standards and utility guidelines adopted by the State of the National Electric Code, the National Electrical Safety Code and the stricter. I certify the installation described above is now ready for
certi pren New Coop	tification entity recognized by the Cooperat emise is in compliance with all applicable c w Mexico, the local jurisdictional authority, operative, whichever has authority and is nection.	ive. I further affirm the installation performed at the above-described odes, safety standards and utility guidelines adopted by the State of the National Electric Code, the National Electrical Safety Code and the
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certi pren New Coop	tification entity recognized by the Cooperate in the cooperate is in compliance with all applicable of w Mexico, the local jurisdictional authority, operative, whichever has authority and is an ection. I am not the contractor who Print Name of Electrical Inspector	ive. I further affirm the installation performed at the above-described odes, safety standards and utility guidelines adopted by the State of the National Electric Code, the National Electrical Safety Code and the stricter. I certify the installation described above is now ready for performed the electrical work on this facility
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Lea County Electric Cooperative, Inc. P.O. Box 1447, Lovington, New Mexico 88260 575-396-3631 sysops@lcecnet.com